Case 1:19-bk-12540 Doc 1 Filed 07/11/19 Entered 07/11/19 13:07:35 Desc Main Document Page 1 of 56

Fill in this information to identify your case	:	
United States Bankruptcy Court for the: SOUTHERN District of OHIO		The second secon
Case number (If known):	Chapter you are filing under: ☑ Chapter 7	19 #1 11 PM 1:01
	☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	RYCHARÐ JONES CLERK O ⊡ Chéck if this is an U.S. EANGUPT Gmended fi ling
The contract of the contract o	N ROBERT TO THE REPORT OF THE PROPERTY OF THE	CARTINE ATI. OHIO

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture	PAULA		
	identification (for example,	First name	First name	
	your driver's license or passport).	JEAN Middle name	Middle name	
	,	MCDOLE	Middle Harrie	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name	
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years	First name	новыминировыминировыминировыминировыминировыминировыминировыминировыминировыминировыминировыминировыминировыми First name	
	Include your married or maiden names.	Middle name	Middle name	
		Last name	Last name	
		First name	First name	
		Middle name	Middle name	
The second of th		Last name	Last name	
im aysa	V OORSCOT KOON 43 HON HERSHALLA SOOT BEHALLA SOOT BEHALLA SOOT BEST VIN BETT VIN BETT VIN BETT VIN BETT VIN BE			
3.	Only the last 4 digits of your Social Security	xxx - xx - 6 2 8 3	xxx - xx	
	number or federal	OR	OR	
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx	
59144489	ANNUAL STATE OF THE PROPERTY AND AND AND AN ARROW OF THE PROPERTY AND AN ARROW OF THE PROPERTY AND ARROWS AND			

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Debtor 1 PAULA JEAN	LMCDOLE	ciii Tage 2 01 3		
PAULA JEAN First Name Middle N		-	Case number (# known)	
के द्वारा क्षेत्र दिन्द्र प्रशास करें के स्वाध कर ने कारण करने के किया है जिसके के किया के किया के किया के किय किया के किया के किया के किया किया किया किया किया किया किया किया	About Debtor 1:	A OPPOPUTATO TO THE ACT OF THE PROPERTY OF THE ACT THE ACT OF THE	About Debtor 2 (Spouse C	Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in	☐ I have not used any busin	ess names or EINs.	☐ I have not used any bus	iness names or EINs.
the last 8 years	Business name		Business name	
Include trade names and doing business as names	Business name		Business name	
	EIN		EIN	
	EIN		EIN	
Where you live	gandentale des meiore aum en entre perférencie de benefet de trois de des antiques en circles est années en an	anne an eagus con un control e de comente se un activo de processor de control de control de control de control	াf Debtor 2 lives at a differ	ent address:
	8741 MONSANTO DRI	VE		
	Number Street	177	Number Street	
	CINTI	OH 45231		
	City	State ZIP Code	City	State ZIP Cod
	HAMILTON			
	County		County	
	If your mailing address is di above, fill it in here. Note the any notices to you at this mail	at the court will send	If Debtor 2's mailing addre yours, fill it in here. Note t any notices to this mailing a	hat the court will send
	Number Street		Number Street	
	P.O. Box		P.O. Box	
	City	State ZIP Code	City	State ZIP Code
Why you are choosing	месятельные этемплекования темплекованый положения солько отностичения от Check one:	ar melefika yan ang salabutus kandanin yang indi na arti salah salah salab asa sa na salab salab salab salab s	en-navirusargagagaco-co-жининунденный описновараца до станица станица станица станица станица станица станица с Check one:	genatura apartemente e Pauliniet - de vannet desti tanvet anthra attenda apartico, i tratino ci colonde frince
this district to file for bankruptcy	Over the last 180 days ber I have lived in this district other district.	fore filing this petition, longer than in any	Over the last 180 days be I have lived in this district other district.	

I have another reason. Explain. (See 28 U.S.C. § 1408.)

☐ I have another reason. Explain.

(See 28 U.S.C. § 1408.)

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Debtor 1

Case number (if known)_____

Pa	74	9.

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.				
	are choosing to file under	🛭 Cha	oter 7			
		☐ Cha	oter 11	1		
		☐ Cha	oter 12	2		
		☐ Cha	oter 13	3		
8.	How you will pay the fee	☐ I will pay the entire fee when I file my petition. Please check with the clerk's office local court for more details about how you may pay. Typically, if you are paying the fe yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or owith a pre-printed address.				
				pay the fee in installments. If you no for Individuals to Pay The Filing is		
		By la less pay	w, a ju than 1 the fee	udge may, but is not required to, v 50% of the official poverty line tha	vaive your fee, a at applies to you is option, you m	ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the Application to Have the with your petition.
9.	Have you filed for	☑ No	a d'an agustain de de ann an Anthair ann an Anthair agus an Anthair agus an Anthair agus agus agus agus agus ag			
	bankruptcy within the last 8 years?	☐ Yes.	District	t When	MM / DD / YYYY	Case number
			District	t When		Case number
					MM / DD / YYYY	
			District	t When	MM / DD / YYYY	Case number
10	. Are any bankruptcy	☑ No	ner sen manaturation		Para Salah Pada P. 1984 A. 1889 P. 1890 a. 1974 A. 1984	
	cases pending or being filed by a spouse who is	Yes.	Debtor			Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?	_ 100.		. When	MM / DD / YYYY	Case number, if known
	annate:		Debtor			Relationship to you
			District	tWhen	MM / DD / YYYY	Case number, if known
11.	Do you rent your residence?	☐ No. ☑ Yes.	Has you No D Yes	line 12. rour landlord obtained an eviction judge o. Go to line 12. es. Fill out <i>Initial Statement About an E</i> art of this bankruptcy petition.		Against You (Form 101A) and file it as

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Debtor 1

PAULA JEAN MCDOLE			OLE	Case number (# known)
	First Name	Middle Name	Last Name	

First Name Middle Name Part 3: Report About Any Bi	usinesses You Own as a Sole Proprietor
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	✓ No. Go to Part 4. ☐ Yes. Name and location of business Name of business, if any Number Street ☐ City State ZIP Code Check the appropriate box to describe your business: ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6)) ☐ None of the above
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	✓ No ☐ Yes. What is the hazard? ☐ If immediate attention is needed, why is it needed? ☐ Where is the property? ☐ Number Street

City

ZIP Code

State

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Debtor 1

PAULA JEAN MCDOLE

Case number (if known)	
------------------------	--

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not	required	to receive	a	briefing	about
credit co	ounseling	because	of:		

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

u	I am not rec	uired to	receive a	briefing	about
	credit coun	seling be	cause of:		

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 1:19-bk-12540 Doc 1 Filed 07/11/19 Entered 07/11/19 13:07:35 Desc Main Document Page 6 of 56

Debtor 1

PAUL	A JEA	N MC	DOLE

Case number (if known)_____

Pa	irt 6: Answer These Ques	stions for Reporting Purposes		
16.	What kind of debts do you have?		consumer debts? Consumer debts primarily for a personal, family, or housel	
	you nave?	No. Go to line 16b.✓ Yes. Go to line 17.		
			business debts? Business debts are stment or through the operation of the business.	
		□ No. Go to line 16c.□ Yes. Go to line 17.		
		16c. State the type of debts you ov	we that are not consumer debts or busin	ess debts.
17.	Are you filing under Chapter 7?	□ No. I am not filing under Chap	ter 7. Go to line 18.	all dina art pead but vorsigin alle des gris ples seu America. Was vorsige des des des des vorsiges alle des g
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		7. Do you estimate that after any exemp are paid that funds will be available to dis	
18.	How many creditors do you estimate that you owe?	☐ 1-49 ☑ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion □ More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion □ More than \$50 billion
Pa	rt 7: Sign Below			
Fo	r you	I have examined this petition, and I correct.	declare under penalty of perjury that th	e information provided is true and
			ter 7, I am aware that I may proceed, if ϵ iderstand the relief available under each	
			did not pay or agree to pay someone wh I read the notice required by 11 U.S.C. §	
		I request relief in accordance with t	the chapter of title 11, United States Coo	le, specified in this petition.
		I understand making a false statem with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and	nent, concealing property, or obtaining m n fines up to \$250,000, or imprisonment l 3571.	oney or property by fraud in connection for up to 20 years, or both.
		* Paula Mc Col	X Simpling	f Datas 2
		Signature of Debtor 1 Executed on 07/05/36 MM / DD / YYY	Signature of Executed of	n
		MM / DD /YYY	Υ	MM / DD /YYYY

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Debtor 1

PAULA JEAN MCDOLE

First Name

Middle Name

Last Nam

Case number (# known)_____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

, , , , , , , , , , , , , , , , , , , ,	
Are you aware that filing for bankruptcy is a serious acticonsequences?	on with long-term financial and legal
□ No ☑ Yes	
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprisor ☐ No ☐ Yes	
Did you pay or agree to pay someone who is not an atto ✓ No ✓ Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Dec	
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware to attorney may cause me to lose my rights or property if I	hat filing a bankruptcy case without an do not properly handle the case.
Signature of Debtor 1	Signature of Debtor 2
Date <u>07/05/30/4</u> MM/DD//YYYY	Date MM / DD / YYYY
Contact phone	Contact phone
Cell phone (513) 344-5274	Cell phone
Email address	Email address

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Fill in this information to identify your case:	
Debtor 1 PAULA JEAN MCDOLE	
First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: SOUTHERN District of OHIO	
Case number	☐ Check if this is an
(If known)	amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical Info	rmation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets
	Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	s 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
45 Conviling 62 Total personal preparty from Cabadyla A/D	s 24,275.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$
1c. Copy line 63, Total of all property on Schedule A/B	\$ 24,275.00
	\$
Part 2: Summarize Your Liabilities	
Summanze Four Elabilities	
	Your liabilities
	Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	•
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$19,475.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$2,000.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	447.000.00
	+ \$ <u>117,823.00</u>
	s 139,298.00
Your total liabilities	\$
Part 3: Summarize Your Income and Expenses	
4. Sahadula I. Vaur Innomo (Official Form 1061)	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,187.00
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	s 3,591.53
Copy your monung expenses nom line 220 01 Schedule J	Ψ

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Debtor 1

PAULA JEAN MCDOLE

TOLA	SEAL MICEOE		
First Name	Middle Name	Last Name	

Case number (if known)_____

								
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?							
	☐ No. You have nothing to report on this part of the form. Check this box and submit this t☐ Yes	er schedules.						
7 .	What kind of debt do you have?	EMILIO POR I PARA COLUMNIC SERVICE DE TITALORIA DE LE COMPANTE POR EMILIO SE CONTRA COLUMNICA SE CONTRA COLUMNICA CONTRA COLUMNICA COLUM	agti sellendik (sir genzi) in dingerimekan sirin in niziri neziligen er empleheden e e er					
		Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
	Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	rt of the form. Check this box a	nd submit					
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	s 5,001.00					
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
		Total claim						
	From Part 4 on Schedule E/F, copy the following:							
	9a. Domestic support obligations (Copy line 6a.)	s0.00						
	9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00 \$2,000.00						
		Ψ						
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$						
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 2,000.00 \$ 0.00						
	 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as 	\$ 2,000.00 \$ 0.00 \$ 100,676.00						

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Fill in this information to identify your case and this	s filing:		
Debtor 1 PAULA JEAN MCDOLE First Name Middle Name	Last Name		
Debtor 2			
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: SOUTHERN Distric	et of OHIO		
Case number		0	Check if this is an
			amended filing
Official Form 106A/B			
Schedule A/B: Propert	У		12/15
responsible for supplying correct information. If m write your name and case number (if known). Answ Part 1: Describe Each Residence, Building, 1. Do you own or have any legal or equitable interes	ore space is needed, attach a separate sheet to the ver every question. Land, or Other Real Estate You Own or Have	is form. On the top of a	
No. Go to Part 2.	st in any residence, building, land, or similar prop	ertyr	
Yes. Where is the property?			
	What is the property? Check all that apply.	Do not deduct secured cla	
1.1.	☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secure Creditors Who Have Clair	
Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home	entire property?	portion you own?
	☐ Land ☐ Investment property	\$	\$
City State ZIP Code	Timeshare	Describe the nature	
City State Zir Code	☐ Other	interest (such as fee the entireties, or a lif	
	Who has an interest in the property? Check one.		
	Debtor 1 only	11.3344.304.004.004.004	
County	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Check if this is co	ommunity property
	☐ At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this it property identification number:	em, such as local	
If you own or have more than one, list here:	property identification number:		
,	What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
1.2.	Single-family home	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Street address, if available, or other description	☐ Duplex or multi-unit building☐ Condominium or cooperative	Current value of the	an and the second
	☐ Manufactured or mobile home	entire property?	portion you own?
	Land	\$	\$
	☐ Investment property ☐ Timeshare	Describe the nature of	of your ownership
City State ZIP Code	Other	interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		· · · · · · · · · · · · · · · · · · ·
	Debtor 1 only		
County	Debtor 2 only	D	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
	Other information you wish to add about this ite	,	
	property identification number:	m, such as local	

1.3.	Street address, if available	e, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	,		Condominium or cooperative	Current value of the entire property?	Current value of th portion you own?
			Manufactured or mobile home	\$	\$
			☐ Land ☐ Investment property	V	¥
	City	State ZIP Code	Timeshare	Describe the nature of	
	Oity	5440 E.I. 5545	Other	interest (such as fee the entireties, or a life	
			Who has an interest in the property? Check one.		
			Debtor 1 only		
	County		Debtor 2 only		
			Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
			☐ At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this ite property identification number:		
	4h - d - 11-11-11-11-1-1-1-1-1-1-1-1-1-1-1		II of andrice from Doub 4 including any option		
ldd i You i	the dollar value of the p have attached for Part	portion you own for a 1. Write that number I	II of your entries from Part 1, including any entries	s for pages	\$0.0
				i	
t 2:	Describe Your	/ehicles			
own	own, lease, or have leg	al or equitable intereses. If you lease a vehicle	st in any vehicles, whether they are registered or a e, also report it on Schedule G: Executory Contracts a		S
you own Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors	al or equitable intereses. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts a		S
you own	own, lease, or have leg that someone else drive , vans, trucks, tractors	al or equitable intereses. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts a		5
you own Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors No	al or equitable intereses. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts a	and Unexpired Leases.	
you own Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors	al or equitable intereses. If you lease a vehicles, sport utility vehicles	e, also report it on Schedule G: Executory Contracts and the contracts of the contracts of the contracts of the contracts of the contract of t		tims or exemptions. Put
you own Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors No	al or equitable intereses. If you lease a vehicles, sport utility vehicles	e, also report it on Schedule G: Executory Contracts and interest in the property? Check one. Debtor 1 only	and Unexpired Leases. Do not deduct secured cla	nims or exemptions. Put d claims on Schedule D:
you own cars line	own, lease, or have leg that someone else drive t, vans, trucks, tractors No 'es	al or equitable intereses. If you lease a vehicles, sport utility vehicles	e, also report it on Schedule G: Executory Contracts and interest in the property? Check one. Debtor 1 only Debtor 2 only	and Unexpired Leases. Do not deduct secured clathe amount of any secured Creditors Who Have Claim	tims or exemptions. Put d claims on Schedule D: ns Secured by Property.
you own cars line	own, lease, or have leg that someone else drive to, vans, trucks, tractors No Yes Make: Model:	al or equitable intereses. If you lease a vehicles, sport utility vehicles	e, also report it on Schedule G: Executory Contracts and motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	and Unexpired Leases. Do not deduct secured clathe amount of any secured.	tims or exemptions. Put d claims on Schedule D: ns Secured by Property.
you own cars	own, lease, or have leg that someone else drive s, vans, trucks, tractors No 'es Make: Model: Year:	al or equitable interests. If you lease a vehicles, sport utility vehicles INFINITY 2012	e, also report it on Schedule G: Executory Contracts and interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property?	nims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own?
you own Cars	own, lease, or have legathat someone else drivens, vans, trucks, tractors. No Yes Make: Model: Year: Approximate mileage:	al or equitable interests. If you lease a vehicles, sport utility vehicles INFINITY 2012	e, also report it on Schedule G: Executory Contracts and motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clain	nims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own?
you own	own, lease, or have legathat someone else drivens, vans, trucks, tractors do res Make: Model: Year: Approximate mileage: Other information:	In al or equitable interests. If you lease a vehicles, sport utility vehicles INFINITY 2012 118000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property?	nims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own?
you own	own, lease, or have legathat someone else drivens, vans, trucks, tractors. No Yes Make: Model: Year: Approximate mileage:	In al or equitable interests. If you lease a vehicles, sport utility vehicles INFINITY 2012 118000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? \$19,475.00	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ 19,475.00
yyou own	own, lease, or have legathat someone else drivens, vans, trucks, tractors do res Make: Model: Year: Approximate mileage: Other information:	In al or equitable interests. If you lease a vehicles, sport utility vehicles INFINITY 2012 118000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property?	nims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ 19,475.00
you own	own, lease, or have legathat someone else drivens, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage: Other information:	In al or equitable interests. If you lease a vehicles, sport utility vehicles INFINITY 2012 118000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 19,475.00	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ 19,475.00
yyou own	own, lease, or have legathat someone else drivens, vans, trucks, tractors. No Yes Make: Model: Year: Approximate mileage: Other information:	In al or equitable interests. If you lease a vehicles, sport utility vehicles INFINITY 2012 118000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 19,475.00 Do not deduct secured clathe amount of any secured the entire property?	nims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ 19,475.00 nims or exemptions. Put d claims on Schedule D: ns Secured by Property.
you own	own, lease, or have legathat someone else drivens, vans, trucks, tractors do res Make: Model: Year: Approximate mileage: Other information:	In al or equitable interests. If you lease a vehicles, sport utility vehicles INFINITY 2012 118000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? \$ 19,475.00 Do not deduct secured clathe amount of any secured Creditors Who Have Clain	nims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ 19,475.00 nims or exemptions. Put d claims on Schedule D: ns Secured by Property.
yyou own	own, lease, or have legathat someone else drivens, vans, trucks, tractors. No res Make: Model: Year: Approximate mileage: Other information: u own or have more than Make: Model: Year:	In al or equitable interests. If you lease a vehicles, sport utility vehicles INFINITY 2012 118000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the entire property? \$ 19,475.00 Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the	nims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ 19,475.00 sims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the

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PAULA JEAN MCDOLE

Debtor 1

Document Page 12 of 56 number (if known)_____ PAULA JEAN MCDOLE Debtor 1 Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ZI No ☐ Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put 41. the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 19,475.00 you have attached for Part 2. Write that number here

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Debtor 1

PAULA JEAN MCDOLE

Do	you own or have any legal or equitable interest in any of the following items?	portion yo	ct secured claims
6.	Household goods and furnishings		
	Examples: Major appliances, furniture, linens, china, kitchenware		
	□ No	1 801100000000000	
	Yes. Describe LIVING ROOM, DINING ROOM BEDROOM KITCHEN DISHES	\$	1,200.00
7.	Electronics	garnuses unimagnuses	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
		lan r-angelon-laness ²	
	Yes. Describe CELL, 2 TV'S, DVD, MUSIC HEADPHONES	\$	800.00
8.	Collectibles of value	g tanggagan maa 16.	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No		
	Yes. Describe	S S	0.00
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	No No	Acces (March 1979) The Control of th	
	Yes. Describe	\$	0.00
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	ROW OF A VILLER	
	Yes. Describe	\$	0.00
11.	Clothes	Old Chapter State 10th	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	Lacronick Gallacon	
	Yes. Describe EVERYDAY & WORK CLOTHES	\$	1,200.00
12	Jewelry		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	No representative and the contract of the cont	Consequence value of the consequence of the consequ	222.55
	Yes. Describe COSTUME	\$	200.00
13.	Non-farm animals	Andrews-Se.	
	Examples: Dogs, cats, birds, horses		
	No production to the control of the	nemerous visiting	
	Yes. Describe	\$	0.00
14.	Any other personal and household items you did not already list, including any health aids you did not list		
	No specific the second of the	olimetoletolose _e	
	Yes. Give specific information.	\$	0.00
	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$	3,400.00
	VI Fait v. Trine wat u vc e	/ L	

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Debtor 1

lame Middle

Last Name

Part 4		ur Financial Assets	any of the following?	portion yo	uct secured claim
16. Cas				or exemptio	115.
Exa	amples: Money you l	have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file your petition		
_	No				
u	Yes		Cash:	\$	0.00
Exa			unts; certificates of deposit; shares in credit unions, brokerage house nultiple accounts with the same institution, list each.	} \$,	
_			Institution name:		
		17.1. Checking account:	HUNTINGTON	\$	0.00
		17.2. Checking account:		\$	0.00
		17.3. Savings account:		_ \$	0.00
		17.4. Savings account:		_ \$	0.00
		17.5. Certificates of deposit:		\$	0.00
		17.6. Other financial account:		_	0.00
		17.7. Other financial account:		* <u></u>	0.00
		17.8. Other financial account:		—	0.00
		17.9. Other financial account:		~	0.00
Exa	amples: Bond funds,	or publicly traded stocks investment accounts with brok	erage firms, money market accounts		
	No Yes	Institution or issuer name:			
_				¢	0.00
				\$ \$	0.00
				_ \$ _ \$	0.00
an ☑	LLC, partnership, a	-	rated and unincorporated businesses, including an interest in % of ownership:		
	Yes. Give specific information about			\$	0.00
	them		0% %	\$	0.00
			U% ₄	•	()(1()

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Debtor 1	PAULA JEAN	MCDO

		er negotiable and non-negotiable instruments ks, cashiers' checks, promissory notes, and money orders.		
		nnot transfer to someone by signing or delivering them.		
☑ No				
Yes. Give specific information about	Issuer name:			0.00
them			\$	0.00
			\$	0.00
			\$	0.00
21. Retirement or pension	accounts			
		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
☑ No				
Yes. List each account separately.	Type of account:	Institution name:		
,.			\$	0.00
	401(k) or similar plan:		•	0.00
	Pension plan:		\$	0.00
	IRA:		\$	
	Retirement account:		\$	0.00
	Keogh:		\$	0.00
	Additional account:		\$	0.00
	Additional account:		\$	0.00
Examples: Agreements companies, or others		ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications		
☐ No ☑ Yes	lmol	titution name or individual:		
• res	Electric:	titution name or individual:	_	0.00
	Gas:		\$	0.00
	Heating oil:		\$	0.00
	Security deposit on rent	tal unit:	\$s	1,400.00
	Prepaid rent:		\$	0.00
	Telephone:		\$	0.00
	Water:		\$	0.00
	Rented furniture:		\$	0.00
	Other:		\$	0.00
23. Annuities (A contract for	a periodic payment o	of money to you, either for life or for a number of years)		
☑ No				
☐ Yes	Issuer name and desc	eription:		
			\$	0.00
			\$	0.00
			a	0.00

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26 U.S.C. §§ 530(b)(1), 529A(b),	and 529(D)(1).			
☑ No ☐ Yes	etitution name and description. Conservator file th	a records of any interests 44 H O.O. 6 F04	(a):	
ın	stitution name and description. Separately file the	e records of any interests.11 0.5.C. § 521	(c):	
_	100		. \$	0.00
	0.00	A A A A A A A A A A A A A A A A A A A	. \$	0.00
-			· \$	0.00
Trusts, equitable or future inter exercisable for your benefit	ests in property (other than anything listed in	line 1), and rights or powers		
☑ No				
Yes. Give specific information about them	mon major mu ushi kudaki ishi. Wa 49 ke zargini ayingu kansada kansada kansada kabunda ushi maki. Mi MEDUSH NO Tajudi Histori o mada		\$	0.0
Patents, copyrights, trademark	s, trade secrets, and other intellectual proper		ometodu ajun	
Examples: Internet domain name	s, websites, proceeds from royalties and licensing	-		
No No			natrice titing	
Yes. Give specific information about them			\$	0.0
European Company				
	r general intangibles usive licenses, cooperative association holdings, l	liquor licenses, professional licenses		
☑ No			market of the second	
Yes. Give specific information about them			\$	0.0
Browner control			money	
oney or property owed to you?			portion Do not de	value of the you own? duct secured exemptions.
Tax refunds owed to you			Clairio Ci	exempleons.
No				
☐ Yes. Give specific information		Federal:	\$	0.00
about them, including wh you already filed the retu		State:	\$	0.00
and the tax years		Local:	\$	0.00
Family support				
Examples: Past due or lump sum	alimony, spousal support, child support, mainten	ance, divorce settlement, property settlem	ent	
☑ No		underhalminischen der sich der		
☐ Yes. Give specific information		Alimony:	\$	0.00
		Maintenance:	\$	0.00
		Support:	\$	0.00
	no construction of the con	Divorce settlement:	\$	0.00
		Property settlement:	\$	0.00
Other	you	THE RESIDENCE OF THE PROPERTY		
Other amounts someone owes				
Examples: Unpaid wages, disabili Social Security benefit	ty insurance payments, disability benefits, sick pa s; unpaid loans you made to someone else	ay, vacation pay, workers' compensation,		
Examples: Unpaid wages, disabili Social Security benefit No	s; unpaid loans you made to someone else	ay, vacation pay, workers' compensation,	oran g	
Other amounts someone owes Examples: Unpaid wages, disabili Social Security benefit ✓ No ✓ Yes. Give specific information.	s; unpaid loans you made to someone else	ay, vacation pay, workers' compensation,		0.0

Filed 07/11/19 Entered 07/11/19 13:07:35 Desc Main Case 1:19-bk-12540 Doc 1 PAULA JEAN MCDOLE Document Page 17 of 56se number (if known) Debtor 1 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value.... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No No ☐ Yes. Give specific information..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **V** No ☐ Yes. Describe each claim..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims M No Yes. Describe each claim..... 0.00 35. Any financial assets you did not already list Z No ☐ Yes. Give specific information..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 1,400.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☐ No

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No

Yes. Describe ...

☐ Yes. Describe....

Document Page 18 of 56se number (# known)_____ PAULA JEAN MCDOLE Debtor 1 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No ☐ Yes. Describe... 41. Inventory ☐ No Yes, Describe 42. Interests in partnerships or joint ventures Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☐ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44. Any business-related property you did not already list ☐ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No Yes

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Document Page 19 of 56se number (if known)_____ PAULA JEAN MCDOLE Debtor 1 48. Crops-either growing or harvested ☐ No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No ☐ Yes. Give specific information..... 0.00 54 Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form Part 8: 0.00 55. Part 1: Total real estate, line 2 19,475.00 56. Part 2: Total vehicles, line 5 3,400.00 57. Part 3: Total personal and household items, line 15 1,400.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 24,275.00 24,275.00 62. Total personal property. Add lines 56 through 61. Copy personal property total -> +\$ 24,275.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

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Fill in this informa	ation to identify your case:			
1 000001	JLA JEAN MCDOLE			
First Na Debtor 2	ame Middle Name	Last Name		
(Spouse, if filing) First Na		Last Name		
	ptcy Court for the: SOUTHERN D	District of OniO	_	☐ Check if this is a
Case number (If known)				amended filing
Official Form	n 106C			
Schedul	e C: The Prop	perty You	Claim as Exemp	t 04/19
Using the property y	ou listed on Schedule A/B: Projout and attach to this page as i	perty (Official Form 106/	gether, both are equally responsible for a NB) as your source, list the property that additional Page as necessary. On the top	you claim as exempt. If more
specific dollar amo of any applicable s retirement funds— limits the exemptio	unt as exempt. Alternatively, tatutory limit. Some exemptio may be unlimited in dollar an	you may claim the full ons—such as those for nount. However, if you nt and the value of the	amount of the exemption you claim. O fair market value of the property bein health aids, rights to receive certain claim an exemption of 100% of fair ma property is determined to exceed that	ng exempted up to the amount benefits, and tax-exempt arket value under a law that
Part 1: Identi	fy the Property You Clain	ı as Exempt		
1 Which set of o	xemptions are you claiming?	Check one only even it	vour snouse is filing with you	
	iming state and federal nonban	•	• •	
	iming federal exemptions. 11 L		•	
2. For any proper	rty you list on <i>Schedule A/B</i> t	hat you claim as exem	pt, fill in the information below.	
	on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	FURNITURE	\$ <u>1,200.00</u>	□ \$	2329.66
Line from Schedule A/B:	6		100% of fair market value, up to any applicable statutory limit	
Brief description:	ELECTRONICS	\$ 800.00	\$ 100% of fair market value, up to	2329.66
Line from Schedule A/B:	7		any applicable statutory limit	
Brief	CLOTHES	\$1,200.00	□s	2329.66
description: Line from		-	100% of fair market value, up to	
Schedule A/B:			any applicable statutory limit	
-	ing a homestead exemption o			
(Subject to adju ✓ No	stment on 4/01/22 and every 3	years after that for case	s filed on or after the date of adjustment.	.)
_	u acquire the property covered	by the exemption within	1,215 days before you filed this case?	
☐ No ☐ Yes				
— 162				

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Case number (# known)

Debtor 1

PAULA JEAN MCDOLE

Part 2:

Additional Page

	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	JEWELRY	\$200.00		2329.66
Line from Schedule A/B:	12		√ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value statutory limit ✓ 100% of fair market	
Brief description:	SEC RENT DEPOSI	\$1,400.00		2329.66
Line from Schedule A/B:	22		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	 \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	***************************************	\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	***
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	G &	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	·
Brief description:		\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	 \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

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	Document Page 22 of 56				
Fill in this information to identify your case	e:				
Debtor 1 PAULA JEAN MCDOLE					
First Name Middle No	arne Last Name				
Debtor 2 (Spouse, if filing) First Name Middle Na	arne Last Name				
United States Bankruptcy Court for the: SOUTHE	RN District of OHIO				
Case number			П	Check if	this is an
(If known)			_	amende	
Official Form 106D					
Schedule D: Creditors	s Who Have Claims Secure	ed by Prop	erty		12/15
Be as complete and accurate as possible.	If two married people are filing together, both are eq	ually responsible fo	or supplyin	g correct	
additional pages, write your name and cas	rthe Additional Page, fill it out, number the entries, a e number (if known).	and attach it to this	torm. On tr	e top or a	iny
4. Do any anditam have plains accured by	v vous proporty?				
 Do any creditors have claims secured by No. Check this box and submit this form 	y your property <i>r</i> n to the court with your other schedules. You have nothi	ng else to report on t	his form.		
Yes. Fill in all of the information below.					
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has m	ore than one secured claim, list the creditor separately	Column A Amount of claim	Column B Value of co	A REPORT OF THE	Column C Unsecured
for each claim. If more than one creditor ha	as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Do not deduct the	that suppo	orts this	portion
	abelical order according to the orealton orname.	value of collateral.			If any
NATIONWIDE CASSEL LP	Describe the property that secures the claim:	\$ 19,475.00	\$19,4	475.00 _{\$}	0.00
Creditor's Name PO BOX 477	2012 INFINITI	TO THE TOTAL PROPERTY OF THE TOTAL PROPERTY			
Number Street					
	As of the date you file, the claim is: Check all that apply. Contingent				
PARKRIDGE IL 60068	✓ Unliquidated				
City State ZIP Code	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgage or secured				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and another	Judgment lien from a lawsuit				
	Other (including a right to offset)	_			
Check if this claim relates to a community debt					
Date debt was incurred	Last 4 digits of account number 0 0 3 1		National designation of the Communication of the Co	QUE DE TOTA TRANSPORTATION DE SANTA PORTO	entraconsumateurs par regionisto est varies (FPO) extract
	Describe the property that secures the claim:	\$	\$	\$	
Creditor's Name					
Number Street		The second secon			
	As of the date you file, the claim is: Check all that apply.				
	☐ Contingent ☐ Unliquidated				
City State ZIP Code	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage or secured				
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Judgment lien from a lawsuit				
	Other (including a right to offset)	-			
Check if this claim relates to a community debt					
Date debt was incurred	Last 4 digits of account number	en general de la companya de la comp		Material de la companya de la compa	IN TO STREET AND THE STREET
Add the dollar value of your entries in C	Column A on this page. Write that number here:	<u>19,475.00</u>			

	Case 1:19-bk-12540 Doc 1	Filed 07/11/19	Entered 07/11/19 13:07:3	B5 Desc Main
Fil	Il in this information to identify your case:		f 56	
De	ebtor 1 PAULA JEAN MCDOLE			
	First Name Middle Name	Last Name		
	obtor 2 ouse, if filing) First Name Middle Name	Last Name		
Un	nited States Bankruptcy Court for the: SOUTHERN Dist	trict of OHIO		D
	se number	4.44.40		Check if this is an amended filing
(If	known)			g
	ficial Form 106E/F			
	chedule E/F: Creditors W			12/15
List A/B: cred need any	as complete and accurate as possible. Use Part the other party to any executory contracts or u Property (Official Form 106A/B) and on Sched ditors with partially secured claims that are liste ded, copy the Part you need, fill it out, number of additional pages, write your name and case nu	inexpired leases that co lule G: Executory Contri ed in Schedule D: Credi the entries in the boxes imber (if known).	ould result in a claim. Also list execu acts and Unexpired Leases (Official F itors Who Have Claims Secured by Pr	tory contracts on <i>Schedule</i> Form 106G). Do not include any roperty. If more space is
	11-1: List All of Your PRIORITY Unsecure			
	Do any creditors have priority unsecured claim: No. Go to Part 2.	s against you?		
	✓ Yes.			
	List all of your priority unsecured claims. If a creach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the cunsecured claims, fill out the Continuation Page of (For an explanation of each type of claim, see the i	a claim has both priority claims in alphabetical ord Part 1. If more than one	and nonpriority amounts, list that claim ler according to the creditor's name. If y creditor holds a particular claim, list the	here and show both priority and ou have more than two priority other creditors in Part 3.
: 				amount amount
2.1	INTERNAL REVENUE SERVICE	Last 4 digits of accoun	nt number \$2,0	000.00 \$ 2,000.00 \$ 0.00
	Priority Creditor's Name 201 W RIVERCENTER BLVD	When was the debt in	curred? <u>04/01/201</u> 9	
	Number Street			
	COVINGTON KY 41011	As of the date you file Contingent	, the claim is: Check all that apply.	
	City State ZIP Code	☑ Contingent ☑ Unliquidated		
: :	Who incurred the debt? Check one. Debtor 1 only	Disputed		
	Debtor 2 only	Type of PRIORITY un	nsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Domestic support obl		
<u> </u>	At least one of the debtors and another		her debts you owe the government	
	Check if this claim is for a community debt	 Claims for death or p intoxicated 	ersonal injury while you were	
	Is the claim subject to offset?			
	Yes	Make Australia (1888 - 1880 - 1884) en 1884 (1885) en 1885 (1884) en 1886 (1885) en 1886 (1885) en 1886 (negotatus jan-in kunstensis se hele persikung eger yoru versikanat si didako cudako umta arabakan persikani kini kilik cilik kilik kilik si didak	elektrii elekt laat taan kata kan kan kan kan kan kan kan kan kan ka
2.2		Last 4 digits of accoun	nt number \$	\$\$
	Priority Creditor's Name	When was the debt inc	surred?	
	Number Street	As of the date you file	, the claim is: Check all that apply.	
		Contingent	, the diaminio. Check an that apply.	
; ;	City State ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	Disputed		
	Debtor 1 only	Type of PRIORITY un	secured claim:	
1	Debtor 2 only	☐ Domestic support obl		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Taxes and certain of	her debts you owe the government	
	Check if this claim is for a community debt	Claims for death or p	ersonal injury while you were	
	Is the claim subject to offset? ☐ No	-		
	☐ Yes			

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Deb	PAULA JEAN MODULE First Name Middle Name Last Name	_ Documen	t—Page 24 of 546e number (# known)		
Pa	rt 2: List All of Your NONPRIORITY Un	secured Claim	s		
3.	Do any creditors have nonpriority unsecured of □ No. You have nothing to report in this part. Su ☐ Yes				
4.	nonpriority unsecured claim, list the creditor separate	rately for each cla	al order of the creditor who holds each claim. If a creditor has im. For each claim listed, identify what type of claim it is. Do not a, list the other creditors in Part 3.If you have more than three no	list cla	ims already
				Tota	il claim
4.1	CRESTLINE Nonpriority Creditor's Name		Last 4 digits of account number 2 0 1 2	\$	2,000.00
	202 CRESTLINE AVE		When was the debt incurred? 06/05/2017		
	CINTI OH City State	45205 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Uny Cauc	211 0000	☐ Contingent		
	Who incurred the debt? Check one. Debtor 1 only	•	Unliquidated Disputed		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt		Student loansObligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	j	
	☑ No ☑ Yes		Other. Specify CONSUMERM		
4.2	DAYTON POWER & LIGHT	u MACANA (ngani nasah makan uma Silembili Mintel Manahan (Misi masa)	Last 4 digits of account number $\frac{1}{01/25/2017}$	\$	537.94
	Nonpriority Creditor's Name		When was the debt incurred? 01/25/2017		
	MURAINE OHIO 45439		As of the date you file, the claim is: Check all that apply.		
	City State Who incurred the debt? Check one.	ZIP Code	☐ Contingent ☐ Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another Check if this claim is for a community debt		Student loans Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	i	
	□ No □ Yes		Content Specify		
4.3	BUTLER COUNTY WATER WORKS Nonpriority Creditor's Name	ORGONIANI CORNI STOROGRAFIA NERI VIRENTO CONTRABATO TRANSICIA (F. 2020-00-CARRI	_ Last 4 digits of account number _0 _0 _0 _1	\$	110.22
	130 HIGH ST		When was the debt incurred? 05/22/1996	-	
	HAMILTON OHIO	45011 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.		☐ Contingent ☑ Unliquidated		
	Debtor 1 only Debtor 2 only		Disputed		
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim:		

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

☐ No

Yes

 $f \square$ Check if this claim is for a community debt

Is the claim subject to offset?

☐ Student loans

Other. Specify

.

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

r listing any entries on this p	age, number them beginning	with 4.4, followed by 4.5, and so forth.	Total clai
SPRINT		Last 4 digits of account number 5 1 1 8	\$ <u>880.</u>
Nonpriority Creditor's Name 6135 GLENWAY AVE		When was the debt incurred? 02/02/2016	
Number Street CINTI	OH 45211	As of the date you file, the claim is: Check all that apply.	
City Who incurred the debt? Check	State ZIP Code	Contingent Unliquidated Disputed	
Debtor 1 only		·	
Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans	
At least one of the debtors and	another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a	community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?		Other. Specify PHONE/CABLE	
☐ No ☐ Yes			
QUALIFIED EMERGEN	CY SPECIALIST INC	Last 4 digits of account number 4 0 5 6	\$ <u>295</u>
Nonpriority Creditor's Name	5. 0. Lon Liot 1110	When was the debt incurred? 03/06/2016	
PO BOX 95389 Number Street			
OKLAHOMA CITY	OK 73143	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check	one.	Disputed	
Debtor 1 only			
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and	another	Student loans	
		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a	community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?		Other. Specify MEDICAL	
₩ No Yes			
		Last 4 digits of account number 5 6 1 2	\$834
STATE COLLECTION S Nonpriority Creditor's Name	ERVICE INC	04/45/0040	
PO BOX 1280		When was the debt incurred?	
OAKS	PA 19456	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check	one.	☐ Disputed	
Debtor 1 only		·	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	anathar	Student loans	
☐ At least one of the debtors and☐ ☐ Check if this claim is for a		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
-	oonaming debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ✓ No ☐ Yes		Other. Specify_CONSUMER	

isting any entries on this page	e, number the	em beginning with	4.4, followed by 4.5, and so forth.	Total clai
AT&T			Last 4 digits of account number 8 0 4 9	s 1,016
onpriority Creditor's Name			- 02/02/2017	Ψ
PO BOX 6416			When was the debt incurred? 03/03/2017	
umber Street			 As of the date you file, the claim is: Check all that apply. 	
CAROL STREAM	IL	60197		
ity	State	ZIP Code	Contingent	
/ho incurred the debt? Check one			₩ Unliquidated	
			☐ Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only				
At least one of the debtors and and	other		☐ Student loans	
At least one of the debiols and and	Julet		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a con	nmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?			Other Specify CELL/INTERNET	
No				
] Yes				
TRI HEALTH IMAGING		от на при на На при на при	Last 4 digits of account number 2 9 0 3	\$ <u>19</u>
onpriority Creditor's Name			When was the debt incurred? 05/01/2018	
0494 MONTGOMERY RE)		When was the debt incurred? U5/U1/2018	
umber Street		450.10	As of the date you file, the claim is: Check all that apply.	
MONTGOMERY	OH	45242		
ity	State	ZIP Code	Contingent	
/ho incurred the debt? Check one	١.		✓ Unliquidated✓ Disputed	
Debtor 1 only			■ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and and	other		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a con	nmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?			Other. Specify MEDICAL	
1 No				
Yes	ičina proproje najednosta počenika konstance se	georgegewynge ûj wydgegen fewigelef en ef helf yn yn gelloadlessellen wie dats, faw ha waar be		i fejirka taki ka krama kaliki kraje ken katawa ka krama
CREDIT ONE BANK	nerven er en er en er en	- The second sec	Last 4 digits of account number 9 7 7 1	_{\$584}
onpriority Creditor's Name			When was the debt incurred? 02/12/2016	
801 S CIMARRON RD			When was the debt incurred? 02/12/2016	
umber Street		20112	As of the date you file, the claim is: Check all that apply.	
AS VEGAS	NV	89113		
ity	State	ZIP Code	Contingent	
/ho incurred the debt? Check one			✓ Unliquidated☐ Disputed	
Debtor 1 only			Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and and	other		Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a con	nmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a con the claim subject to offset?	nmunity debt		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify_CREDIT CARD	

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Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number the	em beginning wit	h 4.4, followed by 4.5, and so forth.	Tot	al claim
.10	CONTROLLED CREDIT CORP		Last 4 digits of account number 9 3 4 1	\$	34.00
	Nonpriority Creditor's Name PO BOX 5154		When was the debt incurred? 02/15/2017		
	Number Street CINTI OH	45205	As of the date you file, the claim is: Check all that apply.		
: :	City State	ZIP Code	— ☐ Contingent ☐ Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Student loansObligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		Other. Specify		
	☑ No ☐ Yes				
.11	DAYTON LUNG & SLEEP MEDICINE	ockeriador, como sincoministrator que notoció y de militar estrecció un secució y consistenció y consistenció	Last 4 digits of account number 0 1 3 6	\$	65.00
	Nonpriority Creditor's Name PO BOX 634851		When was the debt incurred? 05/05/2018		
	Number Street CINCY OH	45263	As of the date you file, the claim is: Check all that apply.		
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		✓ Unliquidated✓ Disputed		
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	☐ Check if this claim is for a community debt is the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify_MEDICAL		
	☑ No ☐ Yes		Gulei. Specify INCOTONE		
.12	EYE MED VISION CARE	BIRTZS MANAGE OCTAGO HERRIPHER BIRTING HERBERGON MEN HERAN	Last 4 digits of account number 7 2 6 4	\$	25.00
	Nonpriority Creditor's Name		When was the debt incurred? 02/02/2016		
	4000 LUXOTTICA PL Number Street				
	MASON OH City State	45040 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent		
	Who incurred the debt? Check one.		✓ Unliquidated		
	Debtor 1 only		☐ Disputed		1
	Debtor 2 only		Type of NONPRIORITY unsecured claim:		* .
	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another		 Student loans Obligations arising out of a separation agreement or divorce that 		,
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		Other. Specify MEDICAL		
	₩ No Yes				

Debtor	1	

r usung any entries on this pag	je, number them 1	reānunā a <u>u</u>	1 4.4, followed by 4.5, and so forth.	Total claim
PATIENT TRANSPORT S	SERVICE		Last 4 digits of account number 3 1 3 8	\$ 307.00
420 WARDS CORNER R	D #8		When was the debt incurred? 05/05/2017	
Number Street LOVELANS	ОН	45140	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent ☐ Unliquidated	
Vho incurred the debt? Check of	ne.		Disputed	
Debtor 1 only			Time of NONDRIGHTY times street electric	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and a	nother		 ☑ Student loans ☑ Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a co	ommunity debt		you did not report as priority claims	
Is the claim subject to offset?	minumy 4021		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify MEDICAL	
No			other. Specify WILDIGAL	
Yes				
ADVANCE AMERICA	ille, com et si side in ministrat grant ministrat per com et trapen a transcriptor a capital	TO COSTO HIS CONTROL OF THE COSTO HIS COSTO HI	Last 4 digits of account number 2 2 5 7	\$ <u>912.00</u>
Nonpriority Creditor's Name			When was the debt incurred? 11/12/2018	
3119 GLENMORE AVE S	STE 8		when was the debt incurred?	
Number Street CINTI	ОН	45211	As of the date you file, the claim is: Check all that apply.	
City		ZIP Code	Contingent	
14/h - 1			Unliquidated	
Who incurred the debt? Check or	ne.		☐ Disputed	
✓ Debtor 1 only✓ Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims	
Is the claim subject to offset?	,		Debts to pension or profit-sharing plans, and other similar debts Other. Specify PAYDAY LOAN	
No			See Other. Specify I ATIDAT LOAK	
Yes				
atu usu ne ekanimin kibelan elikera elikera kesanta energi karan energi aran aran atum bengakan ben benthi di dalami	ስ ትስም-ብርስ ስርብ ያስቸውን ቀላና መቀረባ ባለር። የመንቀስ ተቀቀቀለው የተስፋ ተመመቀው የተስፋ ተመመቀው የተስፋ ተመመቀው የተ	ndon Nasorius CT PRANA da Guerra de Standa de CENTRO (PRA CENTRO) Profesio de Standa de Standa de CENTRO (Profesio de CENTRO) Profesio de CENTRO (PROFESIO A CENTRO) Profesio de CENTRO (PROFESIO A CENTRO) PROFESIO A CENTRO (PROFESIO A CENTRO) PROF	Last 4 digits of account number 4 0 9 2	\$_2,215.00
TRI HEALTH Nonpriority Creditor's Name			- 00/00/0047	
538 OAK STREET			When was the debt incurred? 02/22/2017	
Number Street CINTI	ОН	45219	As of the date you file, the claim is: Check all that apply.	
City		ZIP Code	Contingent	
•			✓ Unliquidated	
Who incurred the debt? Check or	ne.		☐ Disputed	
Debtor 1 only			Time of NONDBIODITY unassented deliner	
☐ Debtor 2 only☐ Debtor 2 only			Type of NONPRIORITY unsecured claim:	
■ Debtor 1 and Debtor 2 only At least one of the debtors and a	nother		Student loans Chilingtons origing out of a consention agreement as discore that	
Check if this claim is for a co			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?			Other. Specify MEDICAL	
☑ No				
Yes				

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Afte	r listing any entries on this page, nur	mber then	n beginning with	4.4, followed by 4.5, and so forth.	Total claim
.16	EAGLE LOAN			Last 4 digits of account number 3 5 7 2	\$_1,536.00
	Nonpriority Creditor's Name 1169 SMILEY AVE			When was the debt incurred? 04/24/2018	
	Number Street CINTI	ОН	45240	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another			☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community the claim subject to offset?	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts other. Specify_CONSUMER LOAN	
	☑ No ☐ Yes			. ,	
.17	PROGRESSIVE LEASING		adipti dagita izalisinin daribih indika indika da indida da nada za nada ne tana na tana da nada ne tana na ta	Last 4 digits of account number 8 8 1 7	\$_2,011.00
	Nonpriority Creditor's Name 256 WEST DATA DR			When was the debt incurred? 01/02/2018	
	Number Street DRAPER	UT	84020	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	□ Contingent □ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only			Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commun	ity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ✓ No ☐ Yes			Other. Specify CONSUMER LEASING	
18	US DEPT OF EDUCATION	Nazamovintus Patrinidas kantoni vienetina bis	rating gibboh kasalon Juliphakas pulak sing Bakasah kebanahan dalam dala	Last 4 digits of account number 4 1 8 2	\$_100,676.0
	Nonpriority Creditor's Name 3130FAIRVIEW PARK DR STE	= 800		When was the debt incurred? 06/01/2000	
	Number Street		22222	- As of the date you file, the claim is: Check all that apply.	
	FALLS CHURCH	State	23323 ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.			 ✓ Unliquidated ☐ Disputed 	
	Debtor 1 only			•	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for #commun	ity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify	
	✓ No ☐ Yes	The second and the se	ne tille då nært i fra som et efte stilleranne til trakke flest til	gybrassaugus , w. 15 1000 p. 1 a ta war san	200

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them	beginning with	h 4.4, followed by 4.5, and so forth.	Tot	al claim
.19	ACCELERATED CREDITORS		Last 4 digits of account number 2 E C 0	\$	72.00
	Nonpriority Creditor's Name 10079 SPRINGFIELD PIKE		When was the debt incurred? 10/11/2013		
	Number Street CINTI OHIO City State	45215 ZIP Code	As of the date you file, the claim is; Check all that apply. — Contingent		
	Who incurred the debt? Check one. Debtor 1 only		✓ Unliquidated☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset? ☐ No ☑ Yes		Debts to pension or profit-sharing plans, and other similar debts Other. Specify MEDICAL		
20		dan surrawwaana menengan menen	Last 4 digits of account number 8 4 6 6	**************************************	240.00
	Nonpriority Creditor's Name 1643 NW 138TH AVEBUILDING H STE	100	When was the debt incurred? 11/20/2017		
	Number Street SUNRISE FL	33323	As of the date you file, the claim is: Check all that apply.		
	•	ZIP Code	☐ Contingent ☐ Unliquidated		
	Who incurred the debt? Check one. ✓ Debtor 1 only		☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify MEDICAL		
	□ No ☑ Yes		We Other Specify HILD TO AL		
21	CAINE & WEINER	nica dia contra di manifesti di supra construire di sul di successi di sul di successi di successi di successi	Last 4 digits of account number 1 1 2 5	\$	245.00
	Nonpriority Creditor's Name 5805 SEPULVEDA BLVD 4TH FL		When was the debt incurred? 01/09/2017		
	Number Street SHERMAN OAKS CA	91411	As of the date you file, the claim is: Check all that apply.		
	City State :	ZIP Code	Contingent Unliquidated		
	Debtor 1 only		☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another		Student loansObligations arising out of a separation agreement or divorce that		
	Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		4
	ls the claim subject to offset? ☑ No ☑ Yes		Other. Specify_RETAIL INSURANCE		

Afte	r listing any entries on this page, number them	beginning with	4.4, followed by 4.5, and so forth.	To	tal claim
.22	CHOICE RECOVERY		Last 4 digits of account number 2 0 1 0	\$	736.00
	Nonpriority Creditor's Name 1550 OLD HENDERSON RD STE 100		When was the debt incurred? 10/05/2017		
	Number Street COLUMBUS OH	43220	As of the date you file, the claim is; Check all that apply.		
	City State	ZIP Code	☐ Contingent ☐ Unliquidated		
	Who incurred the debt? Check one.		Disputed		
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only		☐ Student loans		
	At least one of the debtors and another		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? ☐ No		Other. Specify MEDICAL		
	☑ Yes				
23	CHOICE RECOVERY	COMPANIE DINAMENTO POR DEL SENCIO ESTA CONTRETA CONTRETA CONTRETA CONTRETA CONTRETA CONTRETA CONTRETA CONTRETA	Last 4 digits of account number 2 0 7 5	\$	299.00
	Nonpriority Creditor's Name 1550 OLD HENDERSON RD STE 100		When was the debt incurred? 05/09/2018		
	Number Street		As of the date you file, the claim is: Check all that apply.		
	COLUMBUS OH City State	43220 ZIP Code	Contingent		
	•	2.1 0000	✓ Unliquidated		
	Who incurred the debt? Check one.		☐ Disputed		
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debter 1 and Debter 2 only		☐ Student loans		
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		Other Specify MEDICAL		
	✓ No☐ Yes				
24		es efficielle am une andere escape e consul a financial desentación de la fille color este esta en esta esta e	Last 4 digits of account number 0 1 3 6	\$	720.00
	ENHANCED RECOVERY Nonpriority Creditor's Name				
	PO BOX 57547		When was the debt incurred? 11/26/2018		
	Number Street JACKSONVILLE FL	32241	As of the date you file, the claim is: Check all that apply.		
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		☐ Unliquidated☐ Disputed☐		
	☑ Debtor 1 only		Бізраеч		
	Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Student loans		
	Check if this claim is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	•		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? ✓ No ☐ Yes		Other. Specify CABLE		

		OC <u>T</u>	1 1100 01/11/13		111113 10.01.00	DC3C IV
г 1	~ PAULA JEAN MCDOLE		Document Pa	a 22 of ©@Se	number (# known)	
	First Name Middle Name	Last Name	-Document - i a	gc 32 01 30	-	

Nation and the same manufactures				
listing any entries on this page, numb	er them beginning with	h 4.4, followed by 4.5, and so forth.	То	tal claim
IC SYSTEM COLLECTION		Last 4 digits of account number 8 6 2 3	\$	307.00
Nonpriority Creditor's Name PO BOX 64378		When was the debt incurred? 06/22/2018		
Number Street SAINT PAUL M	N 55164	As of the date you file, the claim is; Check all that apply.		
		Contingent Unliquidated Disputed		
Debtor 1 only				
Debtor 1 and Debtor 2 only At least one of the debtors and another		☐ Student loans		
•	debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset? ☐ No ☑ Yes		other. Specify_IVIEDICAL		
IC SYSTEM COLLECTIONS		Last 4 digits of account number 3 1 5	\$	171.00
Nonpriority Creditor's Name PO BOX 64378		When was the debt incurred? 06/30/2014		
Number Street ST PAAUL M	N 55164	As of the date you file, the claim is: Check all that apply.		
	te ZIP Code	□ Contingent □ Unliquidated		
Who incurred the debt? Check one. ✓ Debtor 1 only		☐ Disputed		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a community sthe claim subject to offset?	debt	Debts to pension or profit-sharing plans, and other similar debts Other. Specify CABLE/CELL		
No D Yes				
MIDLAND FUNDING LLC		Last 4 digits of account number 6 5 5 6	\$	583.00
Nonpriority Creditor's Name 320 EAST BIG BEAVER		When was the debt incurred? 03/19/2015		
		As of the date you file, the claim is: Check all that apply.		
City Stat	te ZIP Code	☐ Contingent☐ Unliquidated		
Who incurred the debt? Check one.		☐ Disputed		
<u>. </u>		Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only				
At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for a community	debt	you did not report as priority claims		
s the claim subject to offset? ☑ No ☑ Yes		Other Specify COLLECTION VREDIT		
	Interpretation of the debt? Check one. Common of the debt? Check one.	lenpriority Creditor's Name PO BOX 64378 Street SAINT PAUL The SAINT	When was the debt incurred? Obstitute Obstitute	When was the debt incurred? 06/22/2018 As of the date you file, the claim is: Check all that apply. Sale

Debto	Case 1:19-bk-12540 PAULA JEAN MCDOLE First Name Middle Name	DOC 1	Document	L9 Entered 07/11/19 13:07:35 Desc Ma Page 33 of 56 number (# known)	in ————
Par	t 2: Your NONPRIORITY Unse	ecured C	laims — Continuat	ion Page	
Afte	r listing any entries on this page, n	umber the	m beginning with 4.4	4, followed by 4.5, and so forth.	Total claim
.28	PORTFOLIO RECOVERY			Last 4 digits of account number 5 0 6 4	\$ 392.00
	Nonpriority Creditor's Name 120 CORPORATE BLVD ST	E 100		When was the debt incurred? 08/19/2016	
	Number Street NORFOLK	٧A	23502	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	□ Contingent □ Unliquidated □ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and anothe	r		Student loansObligations arising out of a separation agreement or divorce that	
į.	Dob a da Walter alaine in fan a announ			you did not report as priority claims	

Nonpriority Creditor's Name			When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this claim is to Is the claim subject to off No Yes	y s and another for a community debt	ZIP Code	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify 	
o Per del BJ Heliofel (allegen mention avenue to a vene to a control of the cont	detail (septiminal menter menter menter menter menter de la carrière de la carriè		Last 4 digits of account number	\$
Nonpriority Creditor's Name			When was the debt incurred?	

Contingent
Unliquidated

Disputed

Student loans

Other. Specify_

Debts to pension or profit-sharing plans, and other similar debts

As of the date you file, the claim is: Check all that apply.

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

Type of NONPRIORITY unsecured claim:

you did not report as priority claims

Other. Specify BANKING

Last 4 digits of account number

No Yes

Number

Debtor 1 only
Debtor 2 only

Who incurred the debt? Check one.

At least one of the debtors and another

☐ Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ Check if this claim is for a community debt

Is the claim subject to offset?

No Yes

ZIP Code

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

aim	
	aim

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

- 0.00
- 2,000.00 6b.
- 0.00
- 0.00
- 6e. 2,000.00

Total claim

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- 6f. 100,676.00
- 0.00 6g.
- 0.00
- 17,147.00
- 117,823.00

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				Document 1	igc 33 01 30	
Fill	in this ir	formation to ide	entify your case:			
		PAULA JEAN	MCDOLE			
Deb	otor	First Name	Middle Name	Last Name		
	otor 2 ouse If filing)	Eiret Name	Middle Name	Last Name		
	-					
Unit	ted States	Bankruptcy Court to	r the: SOUTHERN D	Strict of OHIO	-	
	e number nown)					Check if this is an amended filing
						amended ming
O#	:-:-! r	1000	•			
On	iciai i	orm 1060				
Sc	hed	ule G: Ex	cecutory (Contracts an	d Unexpired Leases	12/15
infor addit	mation. I tional pay Do you h No. C Yes. I	f more space is ges, write your name any executor the space and sp	needed, copy the action arms and case nume ory contracts or une of file this form with the formation below even on or company with	dditional page, fill it out, ber (if known). expired leases? e court with your other sol if the contracts or leases whom you have the co	together, both are equally responsible for suppnumber the entries, and attach it to this page. On the entries are listed on Schedule A/B: Property (Official Formulatract or lease. Then state what each contract or more examples of the entries of t	m. 106A/B). r lease is for (for
2.1	Person o	r company with	whom you have the	e contract or lease	State what the contract or lease is fo	or .
	Name					
	Number	Street			<u> </u>	
- 	City	e distribution and a material state of the contract of the con	State ZIP Cod	de esprendum to, etc. etgist in o polys prendum conservant construit etc. (c.		. No casce as share mercanic services of the case of t
2.2						
1	Name			100		
	Number	Street				
	City		State ZIP Cod	de		
2.3	or with ringularies	SAL VENET TO VERY REPORT NEW TOWNS OF STREET	- + PARAGETEN BUILDE PP-40-200- 42 244 3175 746, 1978-901 (URASSE	kr. 2592 zazor - pistorregi, 2 errei ett ett ett valusa-esperar 1925 ett strelde 1991). 1990 e	indrand the milest of the high half little place on the editablish and provide the edition of the edition of a	is the holosophe decide additional reliables of the state
	Name					
	Number	Street			_	
	City		State ZIP Cod	lo.		
	tin 1918 of the second secul	ars where the entire of the glip his last little while transmit	Атобоординару, Арту тура кат шығында, астамаларындағын түрінің кітеменді.	ing programmen oping to be a state to be such a contract to the state of the state	CBAPPAR NO PHARMANIAN TRANSPORT NEW YORK MARKANIAN BERBA BRUM CONSTR. DOS CHARAN ARTIPA SI KARANTIBURAN ESTANDAM PARK	est alte (il sense descentibilità della conditta di la conditta di la conditta di la conditta di la conditta d Conditta di la conditta di la
2.4					_	
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2.5						The second secon
i	Name					
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		D	ocument F	2age 36 of	56	
Fill in this in	formation to ide	entify your case:				
Debtor 1	PAULA JEAN	MCDOLE				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court fo	r the: SOUTHERN District	of OHIO	_		
Case number (If known)						☐ Check if this is ar
						amended filing
Official F	orm 1061	<u>-1</u>				

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

Do you have ☐ No ☑ Yes	e any codebtors? (If yo	,,	, , , , , , , , , , , , , , , , , , ,	,		
Within the la Arizona, Cali	ifornia, Idaho, Louisian	lived in a community prop a, Nevada, New Mexico, Pu			perty states and territories include onsin.)	
No. Go to				_		
	your spouse, former sp	pouse, or legal equivalent liv	e with you at the time	?		
☐ No☐ Yes	In which community st	ate or territory did you live?		Fill in the name a	nd current address of that person.	
_ , , , ,	in minor community of	ate of termory and you live.			ind duri one address of that person.	
Name	of your spouse, former spous	se, or legal equivalent				
Numb	per Street			-		
City		State	ZIP Code	-		
Schedule D		tor only if that person is a g Schedule E/F (Official Fon ill out Column 2.	-	_		
Schedule D Schedule E/	(Official Form 106D),	Schedule E/F (Official For	-	ule G (Official For Column 2:		ne del
Schedule D Schedule E/ Column 1: \	(Official Form 106D), /F, or Schedule G to fi	Schedule E/F (Official For	-	ule G (Official For Column 2: Check all	m 106G). Use Schedule D, The creditor to whom you owe the schedules that apply:	ne del
Schedule D Schedule E/ Column 1: \ JOHANI Name	(Official Form 106D), /F, or Schedule G to fi Your codebtor	Schedule E/F (Official Fon ill out Column 2.	-	Column 2: Check all	m 106G). Use Schedule D, The creditor to whom you owe the schedules that apply: dule D, line	ne del
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Schedule D Schedule E/ Column 1: \ JOHANI Name 2660 LE Number CINTI City	(Official Form 106D), F, or Schedule G to fi Your codebtor NA WOODS EHMAN RD APT 4	Schedule E/F (Official Formill out Column 2.	m 106E/F), or Sched	Column 2: Check all Sched	The creditor to whom you owe the schedules that apply: dule D, line dule E/F, line dule G, line	e de
Schedule D Schedule E/ Column 1: N JOHANI Name 2660 LE Number CINTI City	(Official Form 106D), (F, or Schedule G to fi Your codebtor NA WOODS EHMAN RD APT 4 Street	Schedule E/F (Official Formill out Column 2.	m 106E/F), or Sched	Column 2: Check all Sched	The creditor to whom you owe the schedules that apply: Sule D, line Sule E/F, line Sule D, line	ne del
Schedule D Schedule E/ Column 1: \ JOHANI Name 2660 LE Number CINTI City Name	(Official Form 106D), (F, or Schedule G to fi Your codebtor NA WOODS EHMAN RD APT 4 Street	Schedule E/F (Official Formal out Column 2.	45204 ZIP Code	Column 2: Check all Sched	The creditor to whom you owe the schedules that apply: dule D, line dule E/F, line dule D, line dule D, line	ane de
Schedule D Schedule E/ Column 1: \ JOHANI Name 2660 LE Number CINTI City Name	(Official Form 106D), (F, or Schedule G to fi Your codebtor NA WOODS EHMAN RD APT 4 Street	Schedule E/F (Official Formal out Column 2.	45204 ZIP Code	Column 2: Check all Sched	The creditor to whom you owe the schedules that apply: dule D, line dule E/F, line dule D, line dule D, line dule D, line	ane del
Schedule D Schedule E/ Column 1: N JOHANI Name 2660 LE Number CINTI City Name	(Official Form 106D), (F, or Schedule G to fi Your codebtor NA WOODS EHMAN RD APT 4 Street	Schedule E/F (Official Formal out Column 2.	45204 ZIP Code	Column 2: Check all Sched	The creditor to whom you owe the schedules that apply: dule D, line dule E/F, line dule D, line dule E/F, line dule E/F, line	del
Schedule D Schedule E/ Column 1: N JOHANI Name 2660 LE Number CINTI City Name Number	(Official Form 106D), /F, or Schedule G to fi Your codebtor NA WOODS EHMAN RD APT 4 Street	Schedule E/F (Official Formal out Column 2.	45204 ZIP Code	Column 2: Check all Sched	The creditor to whom you owe the schedules that apply: dule D, line dule E/F, line dule D, line dule D, line dule D, line	ne del

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Fill in this information to identify	your case:				
Debtor 1 PAULA JEAN MC	DOLE				
First Name Debtor 2	Middle Name	Last Name			
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	SOUTHERN District of OHI	0			
Case number (If known)				Check if th	
					ended filing lement showing postpetition chapter 13
					e as of the following date:
Official Form 106I				MM / DI	07 YYYY
Schedule I: You	r Income				12/15
supplying correct information. If yo	ou are married and not fili se is not filing with you, top of any additional pag	ing jointly, and yo do not include in	our spouse is formation ab	s living with yo out your spou	r 2), both are equally responsible for ou, include information about your spouse. ise. If more space is needed, attach a nown). Answer every question.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☑ Employed ☐ Not employ	/ed		☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.		DECIDENCI	A	orn.	
Occupation may include student or homemaker, if it applies.	Occupation	RESIDENCIA	AL MANAC	JEK	
	Employer's name	CINTI JOB C	ORP/SER	RATO	
	Employer's address	135 W COU	NCIL ST		
		Number Street			Number Street
		TUCSON	AZ	85701	
		City	State ZIP	Code	City State ZIP Code
	How long employed the	re? 2 YRS	-		2 YRS
Part 2: Give Details About	Monthly Income				
Estimate monthly income as of spouse unless you are separated.		n. If you have noth	ing to report	for any line, wri	te \$0 in the space. Include your non-filing
If you or your non-filing spouse ha below. If you need more space, at	ve more than one employe		ormation for a	ll employers fo	r that person on the lines
	·		Fo	r Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sale deductions). If not paid monthly,			2. \$	5,001.00	\$
3. Estimate and list monthly over	time pay.		3. +\$	0.00	+ \$
4. Calculate gross income. Add lin	ne 2 + line 3.		4. \$	5,001.00	\$

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Case number (# known)_

Debtor 1

PAULA JEAN MCDOLE
First Name Middle Name

Last Name

			Fo	r Debtor 1	For Debtor 2 or non-filing spouse		
	Copy line 4 here	. → 4.	\$	5,001.00	\$		
5	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	1,291.00	\$		
	5b. Mandatory contributions for retirement plans	5b.	Ψ_ \$	0.00	\$		
	5c. Voluntary contributions for retirement plans	5c.	\$ \$	0.00	\$		
	5d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$		
	5e. Insurance	5e.	*_ \$	166.36	\$		
	5f. Domestic support obligations	5f.	\$ \$	0.00	\$		
	•		\$_ \$	0.00	\$		
	5g. Union dues 5h. Other deductions. Specify: GARNISHMENT	5g. 5h.	- -	756.36			
		_	+\$_		+ \$		
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5		\$_	2,213.72	\$		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,787.00	\$		
8.	List all other income regularly received:						
	 Net income from rental property and from operating a business, profession, or farm 						
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
	monthly net income.	8a.	\$	0.00	\$		
	8b. Interest and dividends	8b.	\$_	0.00	\$		
	8c. Family support payments that you, a non-filing spouse, or a depen regularly receive	dent					
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		
	8d. Unemployment compensation	8d.	\$	0.00	\$		
	8e. Social Security	8 e.	\$_	0.00	\$		
	8f. Other government assistance that you regularly receive						
	Include cash assistance and the value (if known) of any non-cash assist that you receive, such as food stamps (benefits under the Supplementa Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$	0.00	\$		
	8g. Pension or retirement income	8g.	\$_	0.00	\$		
	8h. Other monthly income. Specify:	8h.	+\$_	0.00	+\$		
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00	\$		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	2,787.00	\$8	= \$_	2,787.00
11.	. State all other regular contributions to the expenses that you list in Sch	nedule .	<i>I</i> .				
	Include contributions from an unmarried partner, members of your household friends or relatives.	-	-	-			
	Do not include any amounts already included in lines 2-10 or amounts that a	re not a	vailabl	e to pay expens	es listed in Schedule J.		
	Specify:				11. 1	- \$_	0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain					S_	2,787.00
	The state and an electrically at 100 10000 and admined and contain				· · · · · · · · · · · · · · · · · · ·	Co	mbined
13	3. Do you expect an increase or decrease within the year after you file thi	is form?	•			mo	nthly income
	✓ No. ☐ Yes. Explain:						
	- 100. Explain.						

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Fill	in this	information to identify	your case:				
Del	otor 1	PAULA JEAN MC	DOLE		e 41. 1 1 .		
Dol	otor 2	First Name	Middle Name Last Name		f this is:		
		First Name	Middle Name Last Name		amended	•	petition chapter 13
Uni	ted States	Bankruptcy Court for the:	SOUTHERN District of OHIO	1	• •	of the following	
	se numbe (nown)			MM .	DD / YYY	Y	
		Tama 400 I	Wilder Committee				
		Form 106J	ur Expenses				12/15
Be a infor (if kn	s compl mation. nown). A	ete and accurate as po If more space is need nswer every question.	ossible. If two married people are fili ed, attach another sheet to this form				ring correct
Par	t 1:	Describe Your Hou	sehold				
		int case?					
		o to line 2. oes Debtor 2 live in a s	separate household?				
		No					
in in ages and magnifer con-		Yes. Debtor 2 must file	e Official Form 106J-2, Expenses for S	Separate Household of Debtor	2.		interfacione de districtiva de la companya del la companya de la companya del la companya de la
Do	not list	ve dependents? Debtor 1 and	☐ No ☑ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	ebtor 2. o not stat	e the dependents'	each dependent	GRANDSON	end constant	7 DAY	□ No ☑ Yes
na	mes.						□ No
				THE STATE OF THE S			Yes
							□ No
							☐ Yes
							☐ No ☐ Yes
							□ No
			191997				☐ Yes
ex	penses	penses include of people other than nd your dependents?	☑ No □ Yes				
yo	21 110 210 20	The second of the second secon	y migrative and a set the first of the continuous and a set of the continuous states of the continuous set of	the control of the second section is the physical of the second s	and the second of the second o	THE RESERVE WAS ASSESSED.	
Part			ng Monthly Expenses				
expe	-	of a date after the ban	bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme			•	•
• •			-cash government assistance if you	know the value of			
	•	•	l it on Schedule I: Your Income (Offi			Your expe	nses
		l or home ownership e or the ground or lot.	xpenses for your residence. Include	first mortgage payments and	4.	\$	1,400.00
lf	not incl	uded in line 4:					
4	a. Real	estate taxes			4a.	\$	0.00
4		erty, homeowner's, or re			4b.	\$	23.53
4		e maintenance, repair, a			4c .	\$	120.00
4	d Hom	enumer's association or	condominium dues		44	e	0.00

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Debtor 1

PAULA JEAN MCDOLE
First Name Middle Name

Case number (if known)_

5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 5. ** 6a. ** 6a. ** 6b. ** 6c. ** 80.00				Your ex	penses
	5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, elhorne, internet, satellitie, and cable services 6c. Telephone, elhorne, satellitie, and cable services 6c. Telephone, and the satellitie, and cable services 6c. Telephone, and support that you did not report as deducted from some services 6c. Telephone, and under services 6c. Telephone, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 105), 6c. Telephone, and under services 6c. T					
6. Water, sewer, garbage collection 6. 8 80.00 6. Other, Specify:	б.		62	\$	
Co. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 80.00				_	
6d. Other, Specify:				\$	
				\$	0.00
	7			\$	
				•	0.00
10. Personal care products and services 10. \$ 80.00 11. Medical and dental expenses 11. \$ 12. Transportation. Include gas, maintenance, bus or train fare. 2 3.50.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 150.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance.				\$	
11. Medical and dental expenses				\$	
12 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12 3,50,00 13 Entertainment, clubs, recreation, newspapers, magazines, and books 13 \$ 150,00 14 Charitable contributions and religious donations 14 \$ 0,00 15 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a Life insurance 15a \$ 0,00 15b Health insurance 15b \$ 0,00 15c Vehicle insurance 15c \$ 258,00 15d Other insurance. Specify: 15d \$ 0,00 15d Other insurance. Specify: 16d \$ 0,00 15d Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15a Car payments for Vehicle 1 17a \$ 610,00 17b Car payments for Vehicle 2 17b \$ 0,00 17c Other. Specify: 17c \$ 0,00 17d Other. Specify: 17d \$ 0,00 17d Other. Specify: 17d \$ 0,00 17d Other. Specify: 17d \$ 0,00 18d Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18 \$ 0,00 19d Other payments you make to support others who do not live with you. Specify: 19 \$ 0,00 20 Other payments you make to support others who do not live with you. 19 \$ 0,00 20 Other payments you make to support others who do not live with you. 19 \$ 0,00 20 Other payments you make to support others who do not live with you. 19 \$ 0,00 20 Other payments you make to support others who do not live with you. 19 \$ 0,00 20 Other payments you make you renter's insurance 20c \$ 0,00 20 Other payments you nother property 20 \$ 0,00 20 Other payments you nother property 20 \$ 0,00 20 Other payments you nother property 20 \$ 0,00 20 Other payments you nother property 20 \$ 0,00 20 Other payments you nother property 20 \$ 0,00 20 Other payment		·		\$	
Do not include car payments. 12 \$ \$ \$ \$ \$ \$ \$ \$ \$		•		·	252.22
14. Charitable contributions and religious donations	12.		12.	\$	350.00
15. Insurance 15a	13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	14.	Charitable contributions and religious donations	14.	\$	0.00
15a. Life insurance 15a. \$ 0.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 258.00 15d. Other insurance. Specify:	15.				
15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 258.00 15d. Other insurance. Specify:					0.00
15c. Vehicle insurance 15c. Vehicle 15d. Vehicle 15d. Vehicle 15d. Vehicle 16c. Vehi		15a. Life insurance	15a.	\$	
15d. Other insurance. Specify:		15b. Health insurance	15b.	\$	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:				\$	
Specify:		15d. Other insurance. Specify:	15d.	\$	0.00
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify:	16.		16.	\$	0.00
17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify:	17.	Installment or lease payments:			
17c. Other. Specify:		17a. Car payments for Vehicle 1	17a.	\$	610.00
176. Other. Specify:		17b. Car payments for Vehicle 2	17b.	\$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 19. Other payments you make to support others who do not live with you. Specify: 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses		17c. Other. Specify:	17c.	\$	0.00
your pay on line 5, Schedule 1, Your Income (Official Form 1061). 19. Other payments you make to support others who do not live with you. Specify:		17d. Other. Specify:	17d.	\$	0.00
Specify:	18.		18.	\$	0.00
20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20d. Volume of this form or on Schedule I: Your Income. 20a. \$ 0.00 20b. \$ 0.00 20c. \$ 0.00 20c. \$ 0.00	19.	Other payments you make to support others who do not live with you.			
20a. Mortgages on other property 20a. \$		Specify:	19.	\$	0.00
20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00	20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.		
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00		20a. Mortgages on other property	20a.	\$	0.00
20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00		20b. Real estate taxes	20b.	\$	0.00
200. Walinchanoc, repair, and aprecep expenses		20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20e. Homeowner's association or condominium dues 20e. \$ 0.00		20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
		20e. Homeowner's association or condominium dues	20e.	\$	0.00

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De	ebtor 1	PAULA JEAN MCDOLE First Name Middle Name Last Name Case number (# kr	own)	
21.	Oth	r. Specify:	21.	+\$0.00
22.	Calc	ulate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a.	\$3,591.53
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$0.00
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$ 3,591.53
				Comments and the state of the s
23.	Calcu	ate your monthly net income.		2 797 00
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$
	23b.	Copy your monthly expenses from line 22c above.	23b.	- \$3,591.53
	23c.	Subtract your monthly expenses from your monthly income.		s -804.53
		The result is your monthly net income.	23c.	\$
24.	Do y	u expect an increase or decrease in your expenses within the year after you file this form?		
		ample, do you expect to finish paying for your car loan within the year or do you expect your age payment to increase or decrease because of a modification to the terms of your mortgage?		
	2 N			
	☐ Ye	Explain here:		

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		Document Pa	age 42 01 50	
ill in this information to identify	your case:			
Paula	Jean	McDole		
ebtor 1 First Name	Middle Name	Last Name	 [.	
ebtor 2 pouse, if filing) First Name	Middle Name	Last Name	_	
ited States Bankruptcy Court for the:	Distric	ct of		
se number				
known)				☐ Check if this is
				amended filing
Official Form 106De	AC			
Declaration A	bout an	Individual	Debtor's Schedules	12/15
thus married poorle are filling	together both are	amuellu manancible fac		
f two married people are filing	together, both are	equally responsible for s	supplying correct information.	
ou must file this form whenev	er you file bankrup	ptcy schedules or amend	led schedules. Making a false statement, conc	ealing property, or
Sign Below				
Did you pay or agree to pay	someone who is !	NOT an attorney to help y	ou fill out bankruptcy forms?	
☑ No				
Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice, Decl	laration, and
			Signature (Official Form 119).	
Under manalty of nations 1 d	laalawa that I hawa			
that they are true and correct		read the summary and so	chedules filed with this declaration and	
(1)	a			
* Taula The No	le	🗶		
Signature of Debtor 1		Signature of Deb	otor 2	
Date 07/11/2019				
Date OI/II/AVI		Date	· www	

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Fill in this information to identify your case:				
Debtor 1 PAULA JEAN MCDOLE First Name Middle Name	Last Name			
ebtor 2				
pouse, if filing) First Name Middle Name	Last Name			
ited States Bankruptcy Court for the: SOUTHERN Distric	at of OHIO	-		
se numberknown)				Check if this is an
-				amended filing
fficial Form 107				
 	fa la dis.	iduala Pilina 4		
atement of Financial Affai	rs for inaly	iduals Filing	or Bankruptcy	04/1
as complete and accurate as possible. If two mari				
ormation. If more space is needed, attach a separ mber (if known). Answer every question.	ate sheet to this for	m. On the top of any addi	tional pages, write your na	me and case
incer (in known). Answer every question.				
art 1: Give Details About Your Marital Sta	tus and Where Y	ou Lived Before		
What is your current marital status?				
☑ Married				
☐ Not married				
☐ Yes. List all of the places you lived in the last 3 y Debtor 1:	years. Do not include Dates Debtor 1 lived there	where you live now.		Dates Debtor 2 lived there
		☐ Same as Debtor 1		Same as Debtor 1
	From			From
Number Street	. From	Number Street	1	To
		****		10
City State ZIP Code	_	City	State ZIP Code	
		Same as Debtor 1		Same as Debtor 1
Number Street	From	Number Street		From
	То			То
	-			
014 7100-4	_	C'h.	Ohra ZID Or de	
City State ZIP Code		City	State ZIP Code	
Within the last 8 years, did you ever live with a s	pouse or legal equi	valent in a community pro	operty state or territory? (C	ommunity property
states and territories include Arizona, California, Ida	ho, Louisiana, Neva	da, New Mexico, Puerto Ri	co, Texas, Washington, and \	Visconsin.)
☑ No				
☐ Yes. Make sure you fill out Schedule H: Your Co	odebtors (Official For	m 106H).		
art 2: Explain the Sources of Your Income				

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Did you have any income from employme Fill in the total amount of income you receive If you are filing a joint case and you have income No Yes. Fill in the details.	ed from all jobs and all bus	sinesses, including part-tir	me activities.	ndar years?
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross Income (before deductions ar exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions bonuses, tips	\$ 15,090.07	Wages, commissions, bonuses, tips	\$
	Operating a business	•	Operating a business	
For last calendar year:	Wages, commissions bonuses, tips	s 34,879.00	Wages, commissions, bonuses, tips	¢
(January 1 to December 31,2018	Operating a business	Ψ	Operating a business	Ψ
For the calendar year before that:	Wages, commissions		Wages, commissions,	
For the calendar year before that: (January 1 to December 31, 2017 YYYY Did you receive any other income during Include income regardless of whether that in unemployment, and other public benefit pay	bonuses, tips Operating a business this year or the two previocome is taxable. Example ments; pensions; rental inc	\$ 59,652.00 ious calendar years? s of other income are alincome; interest; dividends;	bonuses, tips Operating a business nony; child support; Social money collected from laws	suits; royalties; and
(January 1 to December 31, 2017 TYYYY Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from	bonuses, tips Operating a business this year or the two previous is taxable. Example ments; pensions; rental income a joint case and you have	\$ 59,652.00 ious calendar years? s of other income are alincome; interest; dividends; we income that you receive	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once	suits; royalties; and
(January 1 to December 31, 2017 TYYYY Did you receive any other income during Include income regardless of whether that in unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from	bonuses, tips Operating a business this year or the two previous is taxable. Example ments; pensions; rental income a joint case and you have	\$ 59,652.00 ious calendar years? s of other income are alincome; interest; dividends; we income that you receive	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once	suits; royalties; and
(January 1 to December 31, 2017 TYYYY Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from	bonuses, tips Operating a business this year or the two previous is taxable. Example ments; pensions; rental integral a joint case and you have each source separately.	\$ 59,652.00 ious calendar years? s of other income are alincome; interest; dividends; we income that you receive	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4.	suits; royalties; and
(January 1 to December 31, 2017 TYYY Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from No Yes. Fill in the details.	bonuses, tips Operating a business this year or the two previous is taxable. Example ments; pensions; rental indig a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	ious calendar years? s of other income are alincome; interest; dividends; re income that you receive not include income that Gross income from each source (before deductions and	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and e under Debtor 1. Gross income from each source (before deductions a
(January 1 to December 31, 2017 TYYY Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from No Yes. Fill in the defails.	bonuses, tips Operating a business this year or the two previous is taxable. Example ments; pensions; rental indig a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	ious calendar years? s of other income are alincome; interest; dividends; re income that you receive not include income that Gross income from each source (before deductions and	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and e under Debtor 1. Gross income from each source (before deductions a
(January 1 to December 31, 2017 TYYY Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from No Yes. Fill in the details.	bonuses, tips Operating a business this year or the two previous is taxable. Example ments; pensions; rental indig a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	ious calendar years? s of other income are alincome; interest; dividends; re income that you receive not include income that Gross income from each source (before deductions and	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and e under Debtor 1. Gross income from each source (before deductions a
(January 1 to December 31, 2017 TYYY Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from No Yes. Fill in the details.	bonuses, tips Operating a business this year or the two previous is taxable. Example ments; pensions; rental indig a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	ious calendar years? s of other income are alincome; interest; dividends; re income that you receive not include income that Gross income from each source (before deductions and	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and e under Debtor 1. Gross income from each source (before deductions a
Did you receive any other income during Include income regardless of whether that in unemployment, and other public benefit pay gambling and lottery winnings. If you are filing List each source and the gross income from No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	bonuses, tips Operating a business this year or the two previous is taxable. Example ments; pensions; rental indig a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	ious calendar years? s of other income are alincome; interest; dividends; re income that you receive not include income that Gross income from each source (before deductions and	bonuses, tips Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and e under Debtor 1. Gross income from each source (before deductions a

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Debtor 1

PAULA JEAN MCDOLE

AULA	JEAN MODULE		
First Name	Middle Name	Last Name	

Case number	(if known)	

Part 3

List Certain Payments You Made Before You Filed for Bankruptcy

art 3:	List Certain Payments You made Ber	ore You Filed :	Or Ban	Kruptcy		
. Are eith	ner Debtor 1's or Debtor 2's debts primarily	consumer debts	?			
☐ No.	Neither Debtor 1 nor Debtor 2 has primaril "incurred by an individual primarily for a person				defined in 11 U.S.C. § 101	(8) as
	During the 90 days before you filed for bankr	uptcy, did you pa	y any cre	editor a total of \$6	5,825* or more?	
	☐ No. Go to line 7.					
	Yes. List below each creditor to whom yo total amount you paid that creditor. I child support and alimony. Also, do	Do not include pa	yments f	for domestic supp	ort obligations, such as	
	* Subject to adjustment on 4/01/22 and every			=		
☑ Yes	s. Debtor 1 or Debtor 2 or both have primaril	v consumer deb	ts.			
	During the 90 days before you filed for bankro			editor a total of \$6	000 or more?	
	☐ No. Go to line 7.					
	Yes. List below each creditor to whom yo creditor. Do not include payments for alimony. Also, do not include payments.	r domestic suppo	ort obliga	tions, such as ch	ild support and	
		Dates of payment	Total a	mount paid	Amount you still owe	Was this payment for
	CONREX	06/01/2019	\$	1,400.00	\$	☑ Mortgage
	Creditor's Name					Car
	110 BOGGS LN	05/01/2019				Credit card
	Number Street					Loan repayment
	STE 315	04/01/2019				Suppliers or vendors
	CINTI OH 45246					Other
	City State ZIP Code					Calet
	NATIONINAIDE	06/01/2019		610.00		_
	NATIONWIDE Creditor's Name	00/01/2019	\$	010.00	3	☐ Mortgage
	PO BOX 477	05/01/2019				Car
	Number Street					Credit card
		04/01/2019				Loan repayment
	PARKRIDGE IL 60068					Suppliers or vendors
	City State ZIP Code					Other
			\$		\$	☐ Mortgage
	Creditor's Name		***************************************			☐ Car
						Credit card
	Number Street					
						Loan repayment
						Suppliers or vendors
						Other

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Tithin 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? adders include your relatives; any general partners; relatives of any general partners; partnerships of which you are an officer, director, person in control, or owner of 20% or more of their voling securities; and any managing pent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, ch as child support and alimony. 1 No 1 Yes. List all payments to an insider. 1 Dates of Total amount Amount you still Reason for this payment paid over the payment paid over the payment over the payment of the payment over the payments or transfer any property on account of a debt that benefits it is not the payments on debts guaranteed or cosigned by an insider. 1 No 1 Yes. List all payments that benefited an insider. 1 Dates of Total amount Amount you still Reason for this payment insider? 2 Object Total amount Amount you still Reason for this payment payment over insider? 3 No Total amount Amount you still Reason for this payment include creditor's name. 3 Seest Total amount Amount you still Reason for this payment include creditor's name. 5 Seest Total amount Amount you still Reason for this payment include creditor's name. 1 No Total amount Amount you still Reason for this payment include creditor's name. 5 Seest Total amount Amount you still Reason for this payment include creditor's name.	1	PAULA JEAN MCDOLE				Case number (# known)					
Payment Paym		First Name	Middle Name	Last Name		_					
Pee, List all payments to an insider. Dates of payment paid Amount you still Reason for this payment	sid orpo gen uch	iders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; porations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing ent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations,									
Dates of payments to an insider. Dates of payment paid Amount you still Reason for this payment Insider's Name Steet S	ĺ٨	lo									
Payment Paym			ents to an insid	ler.							
Number Street City State ZiP Code S S S S S S S S S S S S S S S S S S S								Reason for this payment			
Number Street City State ZiP Code S S S S S S S S S S S S S S S S S S S						\$	\$				
City State ZIP Code S		Insider's Name				T	Τ				
City State ZIP Code S		Number Chart									
Insider's Name City State ZIP Code City State ZIP Code City State ZIP Code City Insider's Name Dates of payment pald owe Include creditor's name Insider's Name Number Street City State ZIP Code S		Number Street									
Insider's Name City State ZIP Code City State ZIP Code City State ZIP Code City In insider? Note In insider in the payments of transfer any property on account of a debt that benefits the payments on debts guaranteed or cosigned by an insider. Dates of payment Total amount Amount you still own payment own include creditor's name Insider's Name Number Street City State ZIP Code State Street Number Street Number Street											
Insider's Name Cay State ZIP Code Sithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefits insider? clude payments on debts guaranteed or cosigned by an insider. No Pates of Dates of Payment Pald Namount you still pald owe Include creditor's name Insider's Name Number Street Number Street Number Street Number Street		07.		700.	-						
Insider's Name Number Street City State ZIP Code Ithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefite in insider? clude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Amount you still owe Include creditor's name Insider's Name Number Street State ZIP Code S		Ciry	Sta	ate ZIP Code							
City State ZIP Code Tithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefits insider? Clude payments on debts guaranteed or cosigned by an insider. No Dates of Total amount Amount you still Reason for this payment paid owe Include creditor's name						\$	\$				
City State ZIP Code fithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefits insider? clude payments on debts guaranteed or cosigned by an insider. No		Insider's Name									
City State ZIP Code fithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefits insider? clude payments on debts guaranteed or cosigned by an insider. No		Number Street									
insider? Insider's Name City Street Number Street Number Street Name Number Street		-4001									
insider? Insider's Name City Street Number Street Number Street Name Number Street				nere de la companya d							
ithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefits in insider? clude payments on debts guaranteed or cosigned by an insider. No Total amount Amount you still Payment Paid Owe Include creditor's name Insider's Name City State ZIP Code Street Number Street Number Street Number Street		City	Ch	ate 7IP Code	-						
Insider's Name Number Street City State ZIP Code \$ Insider's Name Number Street	n in nclu	sider? de payments on	debts guarante	ed or cosigned b	y an insider. Dates of	Total amount	Amount you still	Reason for this payment			
Number Street City State ZIP Code \$\$						_		The second secon			
City State ZIP Code \$\$ Insider's Name Number Street		Insider's Name				\$	\$				
City State ZIP Code \$\$ Insider's Name Number Street											
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Insider's Name Number Street											
\$ \$											
Insider's Name Number Street		City	Sta	ite ZIP Code							
Insider's Name Number Street							_				
Number Street		Insider's Name				\$	\$				
		Margaria 14dille									
		Number Street									
Chu State 7IP Code					_						

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	_	
Debtor 1	PAULA JEAN MCDOLE	Case number (if known)
DODLOI I		

hin 1 year before you filed for bankru all such matters, including personal inju contract disputes.					
No					
Yes. Fill in the details.					
	Nature	of the case	Court or agency		Status of the cas
	A STATE OF THE STA	AND THE PARTY OF T	4		
Case title			Court Name		— Pending
					On appeal
	- :		Number Street		Concluded
Case number					
	1		City	State ZIP Code	-
Case title			Court Name		Pending
	F				On appeal
	-		Number Street		Concluded
Case number	The state of the s				
	1		City	State ZIP Code	_
lo. Go to line 11.	elow.	any or your property.	iepossesseu, idieciose	d, gamished, attached,	seizeu, or ievieu
lo. Go to line 11.	elow.	Describe the propert		Date	
ck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. US DEPARTMENT OF ED Creditor's Name					Value of the proper
io. Go to line 11. 'es. Fill in the information below. US DEPARTMENT OF ED Creditor's Name		Describe the propert		Date	Value of the proper
lo. Go to line 11. 'es. Fill in the information below. US DEPARTMENT OF ED		Describe the propert	y	Date	Value of the proper
US DEPARTMENT OF ED Creditor's Name PO BOX 790358		Describe the propert	y led	Date	Value of the proper
US DEPARTMENT OF ED Creditor's Name PO BOX 790358		Describe the propert WAGES Explain what happen Property was re	y ned epossessed. oreclosed.	Date	Value of the proper
US DEPARTMENT OF ED Creditor's Name PO BOX 790358 Number Street		Describe the propert WAGES Explain what happen Property was for Property was for Property was go	y n ed epossessed. oreclosed. narnished.	Date 03/25/2019	Value of the proper
o. Go to line 11. es. Fill in the information below. US DEPARTMENT OF ED Creditor's Name PO BOX 790358 Number Street ST LOUIS MO 6	UC	Describe the propert WAGES Explain what happen Property was for Property was for Property was go	y ned epossessed. oreclosed.	Date 03/25/2019	Value of the proper
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US DEPARTMENT OF ED Creditor's Name PO BOX 790358 Number Street ST LOUIS MO 6	UC 	Describe the propert WAGES Explain what happen Property was re Property was for	y epossessed. oreclosed. arnished. attached, seized, or levied	Date 03/25/2019	Value of the properts
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US DEPARTMENT OF ED Creditor's Name PO BOX 790358 Number Street ST LOUIS MO 6	UC 	Describe the propert WAGES Explain what happen Property was re Property was for	y epossessed. oreclosed. arnished. attached, seized, or levied	Date 03/25/2019	Value of the properts
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US DEPARTMENT OF ED Creditor's Name PO BOX 790358 Number Street ST LOUIS MO 6 City State ZIP	UC 	Describe the propert WAGES Explain what happen Property was re Property was g Property was a Describe the propert Explain what happen	epossessed. preclosed. parnished. parnished. parnished. parnished. parnished. parnished. parnished. parnished.	Date 03/25/2019	Value of the properts

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Case number (if known)

PAULA JEAN MCDOLE

Debtor 1

	ptcy, did any creditor, including a bank or financial i	nstitution, set off any amounts from your
ccounts or refuse to make a payment bec	ause you owed a debt?	
No		
Yes. Fill in the details.		
	Describe the action the creditor took	Date action Amount was taken
Creditor's Name	Type with the control of the management of the control of the cont	
		\$
Number Street		
	•	
	The common of the control of the con	
City State ZIP Code	Last 4 digits of account number: XXXX	<u> </u>
5: List Certain Gifts and Contribu	tions	
ithin 2 years before you filed for bankrun	tcy, did you give any gifts with a total value of more	than \$600 per person?
1 No	wy, and you give unly gine with a total value of Hole	aiai. 4000 pei peisoni
Yes. Fill in the details for each gift.		
Gifts with a total value of more than \$600	Describe the gifts	· · · · · · · · · · · · · · · · · · ·
per person	occoning and gine	Dates you gave Value
		Dates you gave Value the gifts
	-	
Person to Whom You Gave the Gift	-	
Person to Whom You Gave the Gift	-	
Person to Whom You Gave the Gift	-	
	-	
Person to Whom You Gave the Gift Number Street	-	
	-	
Number Street City State ZIP Code	-	
Number Street	-	
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		the gifts \$\$ \$ Dates you gave Value
Number Street City State ZIP Code Person's relationship to you		\$\$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		the gifts \$\$ \$ Dates you gave Value
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		the gifts \$\$ \$ Dates you gave Value
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		the gifts \$\$ \$ Dates you gave Value
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		the gifts \$\$ Dates you gave Value the gifts \$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		the gifts \$\$ Dates you gave Value the gifts \$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		the gifts \$\$ Dates you gave Value the gifts \$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street		the gifts \$\$ Dates you gave the gifts \$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		the gifts \$\$ Dates you gave Value the gifts \$

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Case number (if known)

PAULA JEAN MCDOLE

Debtor 1

-	uptcy, did you give any gifts or contributions with a total valu	e of more than \$6	00 to any charity?
No Yes. Fill in the details for each gift or co	antribution.		
res. Fill in the details for each gift of co	maiouson.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name	_	The state of the s	\$
		The contract of the contract o	\$
Number Street		1	
City State ZIP Code			
6: List Certain Losses			
Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property
	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Describe the property you lost and	Include the amount that insurance has paid. List pending insurance		
Describe the property you lost and	Include the amount that insurance has paid. List pending insurance		
	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		
Describe the property you lost and how the loss occurred 7: List Certain Payments or Trathin 1 year before you filed for bankruu consulted about seeking bankrupto	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Introduce the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	lost \$
Describe the property you lost and how the loss occurred 7: List Certain Payments or Trathin 1 year before you filed for bankruu consulted about seeking bankruptchude any attorneys, bankruptcy petition particular properties and the property of the prope	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insfers Introduce the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	lost \$
Describe the property you lost and how the loss occurred 7: List Certain Payments or Traithin 1 year before you filed for bankruu consulted about seeking bankruptcelude any attorneys, bankruptcy petition particulars.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Introduce the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	lost \$
Describe the property you lost and how the loss occurred 7: List Certain Payments or Traithin 1 year before you filed for bankruptcu consulted about seeking bankruptculude any attorneys, bankruptcy petition property of the property of th	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Introduce the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	oss nsfer any property our bankruptcy. Date payment or transfer was	\$to anyone
Describe the property you lost and how the loss occurred 7: List Certain Payments or Traction 1 year before you filed for bankrupt consulted about seeking bankruptchude any attorneys, bankruptcy petition policy of the property of the payments of the property of the pro	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property.	nsfer any property our bankruptcy.	\$to anyone
Describe the property you lost and how the loss occurred 7: List Certain Payments or Traithin 1 year before you filed for bankruptcu consulted about seeking bankruptculude any attorneys, bankruptcy petition property of the property of th	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property.	oss nsfer any property our bankruptcy. Date payment or transfer was	to anyone Amount of payment
7: List Certain Payments or Tra ithin 1 year before you filed for bankru u consulted about seeking bankruptchude any attorneys, bankruptcy petition p No Yes. Fill in the details. Person Who Was Paid	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property.	oss nsfer any property our bankruptcy. Date payment or transfer was	to anyone Amount of payment
7: List Certain Payments or Tra ithin 1 year before you filed for bankru u consulted about seeking bankruptchude any attorneys, bankruptcy petition p No Yes. Fill in the details. Person Who Was Paid	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property.	oss nsfer any property our bankruptcy. Date payment or transfer was	lost \$
7: List Certain Payments or Tra ithin 1 year before you filed for bankruptcu consulted about seeking bankruptcude any attorneys, bankruptcy petition polytes. Fill in the details. Person Who Was Paid Number Street	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property. Insters Introduction of Schedule A/B: Property.	oss nsfer any property our bankruptcy. Date payment or transfer was	to anyone Amount of paymen

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ebtor 1	PAULA JEAN MCDOLE		Case number (if known	n	
		Name		,	
	hadasan salayan iyada safi kisada da kalikan sa hasa sasa kisada kina kina kina kina kana da da kidikin sa hafa	December and value of any preparts		Date payment or	Amount of
		Description and value of any property	ualisiejieu	transfer was made	payment
	Person Who Was Paid			7. 1000	
					\$
	Number Street				\$
	City State ZIP Code				
	Email or website address				
	Person Who Made the Payment, if Not You			10 A A A A A A A A A A A A A A A A A A A	
7. Wit	hin 1 year before you filed for bankrupt	tcy, did you or anyone else acting or	your behalf pay or t	ransfer any property t	o anyone who
pro	mised to help you deal with your credit	tors or to make payments to your cr			-
	not include any payment or transfer that y	ou listed on line 16.			
3	No Yes. Fill in the details.				
	133.1 111 113 3341131	Description and value of any property	transferred	Date payment or	Amount of payme
		and the second second state of the second	the second of a real factor of the second	transfer was made	
	Person Who Was Paid			Ì	
				i i	
	Number Street	en l'en le manuel de la company de la compan			\$
	Number Street	•			\$ \$
	Number Street City State ZIP Code		e angungan Studento (s. 2006, samantina king li Makalika) s		\$ \$
	City State ZIP Code hin 2 years before you filed for bankrup		transfer any propert	y to anyone, other tha	\$s
tra	City State ZIP Code	business or financial affairs?			
trai Incl Do	City State ZIP Code thin 2 years before you filed for bankrup referred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting			
trai Incl Do	City State ZIP Code thin 2 years before you filed for bankrup insferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you have No	business or financial affairs? made as security (such as the granting			
trai Incl Do	City State ZIP Code thin 2 years before you filed for bankrup referred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest o	r mortgage on your pro	perty). Date transfer
trai Incl Do	City State ZIP Code thin 2 years before you filed for bankrup insferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you hav No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting ve already listed on this statement.	of a security interest o	r mortgage on your pro	perty).
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1	PAULA JEAN MCDOLE		Case number (# kn	OWn)	
	First Name Middle Name	Last Name			
		bankruptcy, did you transfer any prope	ty to a self-settled true	st or similar device of v	which you
re a	beneficiary? (These are often of	alled asset-protection devices.)			
Z N					
J Y€	es. Fill in the details.				
		Description and value of the prope	erty transferred		Date transfer
		yearner on a commentary and a commentary of the	tions and another party and a second and a second	ent a terration of the content of th	was made
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8:	List Certain Financial Acc	counts, instruments, Safe Deposit	Boxes, and Storag	e Units	
	-	nkruptcy, were any financial accounts o	or instruments held in	your name, or for your	benefit,
	d, sold, moved, or transferred?				
		narket, or other financial accounts; cert		ares in banks, credit ur	ions,
		cooperatives, associations, and other fi	nanciai institutions.		
No	o es. Fill in the details.				
I Ye	es. Fill in the details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance bef
			nisti dillent	or transferred	Crosing or transit
_					
N	Name of Financial Institution	xxxx	Checking		\$
	lumber Street		☐ Savings		
			☐ Money market		
-			☐ Brokerage		
ō	City State ZIP C	Code	Other		
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N	lame of Financial Institution		Savings		4
_					
N	lumber Street		Money market		
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С	iπy State ZIP C	oge			
	State ZIP C	ode richin 1 year before you filed for bankru	,		
-	ities, cash, or other valuables?		,, -uio uopoott	or ourse aspositor	,
ĺ No					
Ye	es. Fill in the details.				
		Who else had access to it?	Describe th	e contents	Do you st
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Ñ	lame of Financial Institution	Name			🚨 Yes
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		rame. Ouce			
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City

ZIP Code

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	Case number (if known)	
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st than your nome with	r year before you med for bankrupto	yr
as or had access to it?	Describe the contents	Do you s
		have it?
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		☐ Yes
2 COLCA	7	
P Code		
	- 1 (g/s -	
for Someone Else		
owns? include any pro	perty you borrowed from, are storing	ror,
e property?	Describe the property	Value
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up of these substances,	wastes, or material.	
	tal law, whether you now own, operate	e, or
disposal sites.		
	ous waste, hazardous substance, toxi	C
, or similar term.		
ow about, regardless of	when they occurred.	
a liable or notentially lia	ble under or in violation of an environ	montal law?
e hable of potentially ha	ble under or in violation or an environi	incital law i
tal unit i	Environmental law, if you know it	Date of notice
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unit		
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	treet P Code for Someone Eise e owns? Include any pro e property? tatute or regulation condo the air, land, soil, surfup of these substances, d under any environment disposal sites. law defines as a hazardit, or similar term. bw about, regardless of e liable or potentially liaunit tal unit et	Describe the contents Describe the property Describe the contents Describe the property Describe the property

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PAULA JEAN MCDOLE Fust Name Middle Name La	st Name	Case number (if known)	
rust name i i i i i i i i i i i i i i i i i i i	ISA AVGUTARS		
		-	
ve you notified any governmental unit	of any release of hazardous mater	al?	
No			
Yes. Fill in the details.	0	Facine and the State of the Sta	Data af matica
	Governmental unit	Environmental law, if you know it	Date of notice
			1
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code			
uo vou boon a narty în any indicial or a	dministrativo proceeding under an	y environmental law? Include settlement	s and orders
	arministrative proceeding under an	y cittionicital ant inolude scalement	s una oracis.
No Yes. Fill in the details.			
Yes. Fill in the details.		المناف المناف المناف	Status of the
	Court or agency	Nature of the case	case
Case title	_		-
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	_		On appea
	Number Street		☐ Conclude
Case number	_	_	
Case number	City State ZIP Co	de .	
· · · · · · · · · · · · · · · · · · ·			
A sole proprietor or self-employed	l in a trade, profession, or other ac		ny business?
A member of a limited liability con	npany (LLC) or limited liability part	nership (LLP)	
A partner in a partnership An officer, director, or managing e	evacutive of a corporation		
	-	-4i	
☐ An owner of at least 5% of the vot		ation	
No. None of the above applies. Go to			
Yes. Check all that apply above and fi			
	Describe the nature of the busines	s Employer Identification Do not include Social S	
Business Name			•
	_	EIN:	
Number Street	Name of accountant or bookkeepe	r Dates business existed	
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D. Janes Maria	Describe the nature of the busines	s Employer Identification	number
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		Do not include Social Se	ecurity number or ITIN.

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		Describe the nature of the business	Employer Identification number
			Do not include Social Security number or ITH
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Number Street		Name of accountant or bookkeeper	Dates business existed
		• :	
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stitutions, creditors, No Yes. Fill in the deta	, or other parties.		yone about your business? Include all financial
		Date issued	
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12: Sign Below	7		
have mad the aver-	d correct. I understan	nt of Financial Affairs and any attachments, and that making a false statement, concealing nesult in fines up to \$250,000, or imprisonn	and I declare under penalty of perjury that the property, or obtaining money or property by fraction to 20 years, or both.
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nswers are true and	bankruptcy case cau 11, 1519, and 3571.		
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nswers are true and n connection with a 8 U.S.C. §§ 152, 134	t bankruptcy case car 11, 1519, and 3571.	*	
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nswers are true and connection with a 8 U.S.C. §§ 152, 134 Landa Signature of Debtor	11, 1519, and 3571. Mc Cole	Signature of Debtor 2	
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Case 1:19-bk-12540 Doc 1 Filed 07/11/19 Entered 07/11/19 13:07:35 Desc Main Fill in this information to identify your case: Check one box only as directed in this form and in Form 122A-1Supp: PAULA JEAN MCDOLE Debtor 1 1. There is no presumption of abuse. Debtor 2 (Spouse, if filing) First Name Middle Name Last Name 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 United States Bankruptcy Court for the: _SOUTHERN District of OHIO Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of (If known) qualified military service but it could apply later. Check if this is an amended filing Official Form 122A-1 **Chapter 7 Statement of Your Current Monthly Income** 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: **Calculate Your Current Monthly Income** 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions \$ 5,001.00 (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, Debtor 1 Debtor 2 or farm s 0.00 Gross receipts (before all deductions) 0.00 - \$Ordinary and necessary operating expenses Copy 0.00 0.00 Net monthly income from a business, profession, or farm Debtor 1 © 0.00 Debtor 2 6. Net income from rental and other real property Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses

Net monthly income from rental or other real property

7. Interest, dividends, and royalties

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Debtor 1 PAULA JEAN MCDOLE First Name Middle Name Last Name		Case number (# known)	
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8. Unemployment compensation		\$ 0.00	\$
Do not enter the amount if you contend that the amount under the Social Security Act. Instead, list it here:		· · · · · · · · · · · · · · · · · · ·	·
For you			
For your spouse	. \$		
Pension or retirement income. Do not include any ame benefit under the Social Security Act.	ount received that was a	\$0.00	\$
Income from all other sources not listed above. Specific point include any benefits received under the Social Science.	ecurity Act or payments receive	/ed	
as a victim of a war crime, a crime against humanity, or terrorism. If necessary, list other sources on a separate			
		\$0.00	\$
		\$ <u>0.0</u> 0	\$
Total amounts from separate pages, if any.		+ \$ 0.00	+ \$
11. Calculate your total current monthly income. Add line column. Then add the total for Column A to the total for		\$_5,001.00	\$ 5,001.00 Total current monthly income
Part 2: Determine Whether the Means Test App	olies to You		monany meonie
12. Calculate your current monthly income for the year.	•		
12a. Copy your total current monthly income from line	11	Сор	y line 11 here→ \$ <u>5,001.00</u>
Multiply by 12 (the number of months in a year).			x 12
12b. The result is your annual income for this part of the	e form.		12b. \$60,012.00
13. Calculate the median family income that applies to y	ou. Follow these steps:		
Fill in the state in which you live.	OH		
Fill in the number of people in your household.	2		
Fill in the median family income for your state and size o To find a list of applicable median income amounts, go o instructions for this form. This list may also be available	nline using the link specified i	n the separate	13. \$ 60,822.00
14. How do the lines compare?			
14a. Line 12b is less than or equal to line 13. On the Go to Part 3.	top of page 1, check box 1, 7	here is no presumption	of abuse.
14b. Line 12b is more than line 13. On the top of pag Go to Part 3 and fill out Form 122A-2.	e 1, check box 2, The presun	nption of abuse is detern	nined by Form 122A-2.
Part 3: Sign Below		-	
By signing here, I declare under penalty of perjur	ry that the information on this	statement and in any att	achments is true and correct.
* Dansa McDole	×		
Signature of Debtor 1	S	Signature of Debtor 2	
Date 07/05/26/9 MM / DD / 1999	[Date MM / DD /YYYY	
If you checked line 14a, do NOT fill out or file	Form 122A-2.		
If you checked line 14b, fill out Form 122A-2	and file it with this form.		